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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	ation, Inc	- · · <del></del> · ·	
N22000002586 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Susan Burton			
	(Name of Contact Pe	erson)	
The Tarmac Foundation, Inc.			
· · · · · · · · · · · · · · · · · · ·	(Firm/ Company	······································	
10061 Neamathla Trail			
	(Address)		
Tallahassee, FL 32312			
	(City/ State and Zip	Code)	
thetarmactlh@gmail.com			
E-mail address: (to be use	d for future annual rep	port notification	1)
For further information concerning this matter, please	e call:		
Susan Burton	at	850	251-3418
(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	D Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing Address	<u>Sti</u>	reet Address	
Amendment Section Division of Corporations		nendment Secti	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

The Tarmac Foundation, Inc.

N22000002586			
(Document Num	ber of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ates, this <i>Florida Not For Profit Cor</i>	porution adopts the	e following
A. If amending name, enter the new name of the corpor	ation:		
			_The new
name must be distinguishable and contain the word "corpor" "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abb	reviation "Corpo" —: ™	or Enc."
conquary or cir may not be used in the name.			1 <u>.</u>
B. Enter new principal office address, if applicable:			<u> </u>
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>S</u> )		-2
		S S	2
	<del></del>		ءَ جَيَ
C. Enter new mailing address, if applicable:		프롤	0
(Mailing address MAY BE A POST OFFICE BOX)		ــــــــــــــــــــــــــــــــــــــ	9
			_
D. If amending the registered agent and/or registered of	fice address in Florida, enter the na	ame of the	
new registered agent and/or the new registered office			
Name of New Registered Agent:			
			<del></del>
	(Florida street ada	lpasei	
New Registered Office Address:	The state of the s	(Caa)	
		Planta.	
<del></del>	(City)	, Florida (Zip Code)	
	•		
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J		one of the position	
incress, accept the appointment as registered agent. I am j	атия жин ана ассері те отіванс	пь ој те розиют.	
	Signature of New Registered Agent, i		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT         John Do           V         Mike Jo           SV         Şally Sr	ne <u>s</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	Officer	Charles Langston	10061 20343 NE Talquin Hosford, FL 32334
X Remove			
2) Change $X$ Add	VP	Jennifer Pearce	1383 Conservancy Drive E Tallahassee, FL 32312
Remove 3) Remove Add Remove	Officer	Michael Thompson	8350 Hunters Ridge Tallahassee, FL 32312
4) Change Add			
Remove  5) Change Add Remove			
6) Change Add			
Remove  E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
	<del></del>		

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		<del></del>
The date of each amendment(s) adoption date this document was signed.	on:	if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not be ent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

Dated	1-24-24
Signati	ure San Carlo
- G	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Susan Burton
	Susan Burton  (Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were