N22000007483

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COVER LETTER

Division of Corporations POLK COUNTY VOTERS LEAGUE INC NAME OF CORPORATION: N22000007483 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RANDOLPH BARNES (Name of Contact Person) POLK COUNTY VOTERS LEAGUE INC (Firm/ Company) 906 HAMMOCK SHADE DR (Address) LAKELAND, FLORIDA, 33809 (City/ State and Zip Code) Rbarnes8@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Randolph Barnes 863 698-9677 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

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

		of		73.24
POLK COUNTY VOTERS LEAGUE INC				- 2
(Name of Corporation as currently filed with the	Florida De	pt. of State)	· · · · · · · · · · · · · · · · · · ·	<u> </u>
N22000007483				;;. F
(Docum	ent Number	of Corporation (if	known)	100
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida Not</i>	For Profit Corporation add	opts the following
A. If amending name, enter the new name of the	corporatio	on:		;,
			. 19 11	The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorpora	ted for the abbreviation "(Corp. or Inc.
B. Enter new principal office address, if applical	bla:	NA		
(Principal office address MUST BE A STREET A				
	-		-	
	_	<u> </u>	·- · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE E	BOX)	NA		
	_			
D. If amending the registered agent and/or regis			la, enter the name of the	
new registered agent and/or the new registere	ea omice aa NA	<u>aress:</u>		
Name of New Registered Agent:				
·	NA			
New Registered Office Address:			(Florida street address)	
	NA		,	NA
		(City)	, Florida ¹ (Zip Co	
		(Cuy)	(Lip Ci	rut j
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	<mark>Registered A</mark> t. I am fami	<mark>gent:</mark> iliar with and acce	pt the obligations of the po	sition.
•	-		-	
	Sign	nature of New Reg	istered Agent, if changing	

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	<u>PT</u> <u>Y</u> <u>SV</u>	John Doe Mike Jones Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	Address		
i) Change Add		NA			
Remove					
2) Change Add	_ 	NA .			
Remove 3) Change Add Remove		NA			
4) Change Add		NA			
Remove					
5) Change Add		NA			
Remove					
6) Change Add		NA			
Remove					
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)			
Add Article IX: Dissoluti	on of Co	poration	· · · · · · · · · · · · · · · · · · ·		
Said organization is organ	nized exc	lusively for charitable, religious, educational, and scien	ntific		
purposes, including, for such purposes, the making of distributions to organizations that qualify					
exempt organizations described under Section 501(c)(3) of the Internal Revenue Code, or					
corresponding section of a	any futur	e federal tax code.			

Upon the dissolution of the organization, assets shall be distributed for	one or more exempt
purposes within the meaning of Section 501(c)(3) of the Internal Reven	ue Code, or corresponding
section of any future federal tax code, or shall be distributed to the fede	ral government, or to a
state or local government, for a public purpose.	
	······································
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after a	
<u>Note:</u> If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	story filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated Jeptember 7, 2022 Signature Janelyth Barre
(By the chairman or vive 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)
Randolph Barnes
(Typed or printed name of person signing)
President

(Title of person signing)