N22 0000 8225

(Red	questor's Name)	
(Add	iress)	
(Add	dress)	
(1100	11033)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
,	,	,
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Ci-llttia-a-a	Titles Officer	
Special Instructions to F	iling Officer:	

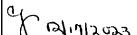


700419801637

12/04/23--01018--021 ++52.50

2023 FEC - 4 KH 8: 25

Office Use Only



COVER LETTER

TO: Amendment Section Division of Corporations

FIRST RESPONDE	RS APPRECIATION FUN	D. INC.
N22000008225 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt		
TRUDY D. DODSON, FRP		
·	(Name of Contact Person)	
MCDONALD HOPKINS, LLC		
	(Firm/ Company)	
501 South Flagler Drive, Suite 200		
	(Address)	
West Palm Beach, Florida 33401		
	(City/ State and Zip Code)	
tdodson@mcdonaldhopkins.com		
E-mail address: (to be used	Hor future annual report n	otification)
For further information concerning this matter, please	call:	
Frank Good, President	at	
(Name of Contact Person) (Are	a Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depar	tment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street A	ddress

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

2023 DEC -4 FH 8: 25

TIKST RESTONDERS ATTRECIATION FOND, INC.		
(Name of Corporation as currently filed with the Florida	da Dept. of State)	
N22000008225		···
(Document Nu	imber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Stramendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	orațion:	
FIRST RESPONDERS APPRECIATION FOUNDATION	N, INC.	The new
name must be distinguishable and contain the word "corp "Company" or "Co," may not be used in the name.	oration" or "incorporated	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		enter the name of the
Name of New Registered Agent: N/A		
New Registered Office Address:	(Flo	rıda sıreet address)
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		he obligations of the position.
N/A		
	Signature of New Registe	red 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>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	N/A	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change Add				
Remove			-	
2) Change Add				
Remove 3) Change Add Remove				
4) Change Add				
Remove				
5) Change Add		-		
Remove				
6) Change Add				
Remove				
E. If amending or additional sheet	ng additi ets, if nec	onal Articles, enter changessary). (Be specific)	e(s) here:	
N/A				

•	
· · · · · · · · · · · · · · · · · · ·	
The date of each amendment(s) adoption:, if other	than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	_
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.	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.	

Dated	OCTOBER 20TH 2027
Signati	
	(By the chairman of ice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	FRANK GOOD
	(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