N22013

(Re	questor's Name)	
	_	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Ви	siness Entity Nan	ne)
(Lo	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	NAMI Pinellas Cour	nty, Florida, Inc.		
	N22013			
DOCUMENT NUMBER:				
The enclosed Articles of An	nendment and fee are subr	nitted for filing.		
Please return all correspond	ence concerning this matte	er to the following:		
Denise Whitfield				
		(Name of Contact Pe	erson)	
NAMI Pinellas County, Flo	orida, Inc.			
		(Firm/ Company	y)	
8800 49th Street North, #30)2			
		(Address)		
Pinellas Park, FL 33782				
		(City/ State and Zip	Code)	
dwhitfield@nami-pinellas.	org			
	-mail address: (to be used	for future annual re	port notification	1)
For further information con-	cerning this matter, please	call:		
Denise Whitfield		at	727	420-1861
	(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	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 enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

FILED

NAMI Pinellas County, Florida, Inc.		2021 OCT 15 AM 10:
(Name of Corporation as currently filed with the	e Florida Dept. of State)	
N22013		SECRETARY OF STATEMENT OF STATE
(Docum	nent Number of Corporation (if ki	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rid a Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	t "corporation" or "incorporated e.	f or the abbreviation "Corp." or "Inc.
	_	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		
Trincipul Office duaress MOST DE TISTREST		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
D. If amending the registered agent and/or regi		enter the name of the
new registered agent and/or the new register	 -	
Name of New Registered Agent:	Dr. Brittany Peters	
	8800 49th Street North, #302	
	(Florida street address)	
New Registered Office Address		
	Pinellas Park	Fl. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:	
I hereby accept the appointment as registered ager		the obligations of the position.
	Brittany Peters Brittany Peters (Sep 30, 7071 10 16 EDT)	
	Signature of New Regist	ered 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	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Ann S. Rogers	4715 Bay Street NE #227 St. Petersburg, FL 33703
× Remove 2) Change × Add	<u>P</u>	Dr. Brittany Peters	8800 49th Street N, #302 Pinellas Park, FL 33782
x Remove 3) Change Add Remove	<u>T</u>	Justin Shea	3600 37th Street N St. Petersburg, FL 33713
4) Change Add	<u>T</u>	Louis Orloff	8800 49th Street N, #302 Pinellas Park, FL 33782
Remove 5) Change Add	Past Prc.	Rosalic Boucher	4021 Bełmoor Dr Palm Harbor, FL 34685
x Remove 6) Change Add			
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			

		
		
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The date of each amendment(s) adoption:	September 29, 2021	, if other than the
date this document was signed.		
Effective date if applicable:	o more than 90 days after amendment file date)	
(n	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does a document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

There are no membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
Dated	September 29, 2021
Signature	Brittany Peters Britany Peters (Sep 30, 2021 10 16 E01)
(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)
	Bristany Peters
	(Typed or printed name of person signing)
	Board Prisident
	(Title of person signing)