## N23000002197

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SECRETARY OF STATE

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ST. LU	JCIE PAL INC.			
DOCUMENT NUMBER: N23000002	2197			
The enclosed Articles of Amendment ar	nd fee are submitted for filing.	•		
Please return all correspondence concern	ning this matter to the followi	ng:		
Peter Del Toro				
	(Name of Conta	act Person)		<del></del>
Del Toro Law				
	(Firm/ Con	npany)	•••	<del></del>
525 SW Camden Avenue				
	(Addre	ss)		
Stuart, FL 34994				
	(City/ State and	l Zip Code)		
peter@deltoro.law				nas r
E-mail addre	ss: (to be used for future annu	al report notification	)	一层
For further information concerning this	matter, please call:			SECTION OF PH 1: 44 SECTION OF STATE SUMBER PL
Peter Del Toro		at772	444-0101	(A) (B)
(Name of C	Contact Person)	(Area Code)	(Daytime Telephone N	lumber) [1] ()
Enclosed is a check for the following an	nount made payable to the Flo	orida Department of :	State:	一番
■ \$35 Filing Fee □\$43.75 F Certifica	Filing Fee & S43.75 Filing ate of Status Certified Cop	y Certifi	Filing Fee cate of Status ed Copy	

enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

(Additional Copy is Enclosed)

## Articles of Amendment to Articles of Incorporation of

СT	1.1	IC1	C I	3 A 1	1.5	$\sim$
		16	P- 1			

(Name of Corporation as currently filed with th	e Florida [	Dept. of State)	
N23000002197			
(Docur	nent Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statute	es, this Florida Not For Profit Corporation adopts the fo	ollowing
A. If amending name, enter the new name of th	e corporat	ion:	
N/A		7	The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the nam		ion" or "incorporated" or the abbreviation "Corp." or	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		2203 ORANGE AVENNUE	
		FORT PIERCE, FL. 34950	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2203 ORAGNE AVENUE	
		FORT PIERCE, FL, 34950	
D. If amending the registered agent and/or reginew registered agent and/or the new register			
Name of New Registered Agent:	N/A		ST 2
<u>Name of New Registerea Agent.</u>	2203 OR	ANGE AVENUE	TA A
New Registered Office Address:		(Florida street address)	61.)
	FORT PI	ERCE . Florida 34950 . Florida	
		(City) (Zip Code) (City)	
New Registered Agent's Signature, if changing			1. t
I hereby accept the appointment as registered ager	it. I am fai	niliar with and accept the obligations of the position.	
-	Si	gnature of New Registered 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	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		<del>.</del>	
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add	-	-	SECRET TALLA
Remove			
6) Change Add			HASSE
Remove			Es =
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	m F
ARTICLE III ON PAGE	1 OF TH	E ARTICLES OF INCORPORATION SHOUL	D BE AMENDED TO READ AS FOLLO
Article III			
The specific purpose for	which thi	s corporation is organized is:	
THE PURPOSE OF ST.	LUCIE P	AL. INC. IS EXCLUSIVELY CHARITABLE	AND EDUCATIONAL WITHIN THE ME

UPON DISSOLUTION OF THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE EXEMPT

OF THE INTERNAL REVENUE OF	CODE OR CORRESPONDING SECTION OF ANY FUTURE F	EDERAL CODE	
OR SHALL BE DISTRIBUTED TO	O THE FEDERAL GOVERNMENT OR A STATE OR LOCAL	GOVERNMENT	
FOR A PUBLIC PURPOSE.			
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		EC T	2023
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		AHA SHA	2023 MAY 19
	<del>-</del>	ESSYH:	7
The date of each amendment(s) adoption:		ர். otl	her than the
Effective date if applicable:		TATE	£
Interive date it applicable.	(no more than 90 days after amendment file date)	<del></del>	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed	d as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendal.	dment(s)	

**TREASURER** 

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

(Title of person signing)

2023 MAY 19 PM 1: 44

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