N44103

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Rotary Club of I	Panama City-Northside, Inc.	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Betty Knight		
	(Name of Contact Persor	1)
Rotary Club of Panama City Northside		
	(Firm/ Company)	
PO BOX 16 34 4		
*	(Address)	
Panama City, FL 32406		
	(City/ State and Zip Code	:)
bknight@innovationsfcu.org		
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, pl	ease call:	
Betty Knight/Treasurer	850 at)-896-9302
(Name of Contact Pe		ea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount mad	de payable to the Florida Depa	artment of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	_	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Rotary Club of Panama City-Northside, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N44103 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Rotary Club of Panama City-St. Andrews, Florida USA, Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co," may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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	$\frac{\underline{PT}}{\underline{V}}$ $\underline{\underline{SV}}$	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change Add				
Remove				
2) Change Add			<u> </u>	
Remove 3) Remove Add Remove				
4) Change Add				
Remove				
5) Change Add				
Remove				
6) Change Add				
Remove				
E. If amending or addin (attach additional shee	g additie ts, if nece	nal Articles, enter change(s ssary). (Be specific)	s) here:	

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The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	
Effective date <u>if applicable</u> :	
Note: If the date inserted in this block does not meet the applicable statutory filing requireme	ents, this date will not be listed as the

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

(CHECK ONE)

document's effective date on the Department of State's records.

Adoption of Amendment(s)

Dated	03/15/2023
Signatur	mothy C. Campbell
	(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)
	Timothy Campbell
	(Thurst and the Lance of Carry and the Carry)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing) President