(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

**FO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Mayor's Beautification Program, inc.					
DOCUMENT NUM	BER: N50140		<del></del>		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.			
Please return all corre	espondence concerning this mat	ter to the following:			
	Debra	a D. Evenson	<u> </u>		
	(Name of	f Contact Person)			
	Tampa B	ay Beautification			
,	(Firm	n/ Company)			
	РО	Box 2104			
	. (	Address)			
<del></del>	<del></del>	ea, FL 33601			
	(City/ Sta	ate and Zip Code)			
		impabaybeautification.org ed for future annual report notificat	ion)		
For further information	on concerning this matter, pleas	e call:			
Debra D. Evenso	n .	at ( 813 ) 221-8733			
(Name	of Contact Person)	(Area Code & Daytim	e Telephone Number)		
Enclosed is a check f	or the following amount made [	payable to the Florida Department	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)		
Ame Divis P.O.	ing Address Indment Section It is a Corporations It is a Corporations It is a Corporation in the Corporation	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	· !		



June 22, 2010

DEBRA D EVENSON P.O. BOX 2104 TAMPA, FL 33601

SUBJECT: MAYOR'S BEAUTIFICATION PROGRAM, INC.

Ref. Number: N50140

We have received your document for MAYOR'S BEAUTIFICATION PROGRAM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 710A00015390

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## Articles of Amendment to Articles of Incorporation of

Mayor's Beautification Pro	gram, inc.				
(Name of Corporation as currently filed with the Florida Dept. of State)					
N50140					
(Document Number of Corporation (if known)					
Pursuant to the provisions of section 617.1006, Florida Statutes, the following amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts				
A. If amending name, enter the new name of the corporatio	<u>n:</u>				
_ Tampa Bay Beautification	on, inc.				
The new name must be distinguishable and contain the word abbreviation "Corp." or " Inc." <mark>"Company" or "Co." may not</mark>					
B. Enter new principal office address, if applicable:	401 East Jackson Street				
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Suite 1825				
	Tampa, FL 33602				
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)					
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade					
New Registered Office Address: (Flori	ida street address)				
	(City) , Florida (Zip Code)				
	(City) (Zip Code)				
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am position.					

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Addre	<u>ss</u>	Type of Action
<del></del>	<del></del>			_
	<del> </del>			
E. If amer	nding or adding additional Ar additional sheets, if necessary).	ticles, enter change(s) (Be specific)	here:	
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The date of each amendment(s) ac	doption: 4/21110
Effective date if applicable:	(dale of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated G	/11/10
(By the c have not	chairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or art appointed fiduciary by that fiduciary)
<del></del>	Jim HACKMAN
	(Typed or printed name of person signing)  PRESIDENT
	(Title of person signing)

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