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Office Use Only



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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Santa Bosa Clean Community System, Inc.
DOCUMENT NUMBER: N 940000 58 7 7
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kevin M. Smith
(Name of Contact Person)
(Firm/ Company)
6758 Park Ave
(Address)
Milton, FL 32570 (City/ State and Zip Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kevin M. Smith at 850 623 1930
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is Certified Copy (Additional Copy is Certified Copy (Additional Copy is Certified Copy is Certified Copy (Additional Copy is Certified Copy is Certifie

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed)

Articles of Amendment	
	Δ [*]
Articles of Incorporation	16
Santa Rosa Clean Community System, Inc.	Property of the Park
(Name of Corporation as currently filed with the Florida Dept. of State)	14
N94000005877	
	\$\hat{3}{2}
(Document Number of Corporation (if known)	104
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
Keep Santa Rosa Beautiful, Inc. The new	
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:	
November of New Projects and America	
Name of New Registered Agent:	
	
(Florida street address) New Registered Office Address:	
, Florida	
(εφ εσάε)	
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	
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	$\underline{\mathbf{V}}$ Mike	Doe Jones Smith			
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					

If amending or adding additio (attach additional sheets; if neces	ssary). (Be specij	fic)			
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		*			

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date if applicable:	
(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 locument's effective date on the Department of State's records.	not be listed as 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.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
$\frac{8/23/2017}{}$	
Signature Keri DD. Shri	
(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)	
Kevin M. Smith	
(Typed or printed name of person signing)	
Executive Director	
(Title of person signing)	