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COVER LETTER

TO: Amendment Section Division of Corporations	•
Division of Corporations	•
NAME OF CORPORATION: Pasco Fine Art	s Council, Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Susan Ray	
	(Name of Contact Person)
Pasco Fine Arts Council, Inc.	
	(Firm/ Company)
4145 Fairford Drive/ PO Box 323	
	(Address)
New Port Richey, FL 34652/Elfers, FL 34680	
	(City/ State and Zip Code)
pacart4@gmail.com	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter,	please call:
Susan Ray	727-798-2091
(Name of Contact I	Person) at (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount m	nade payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of St	
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flor	ida Dept. of State)	-
Pasco Fine Arts Council, Inc.		
(Document N	umber of Corporation (if)	known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not F</i>	for Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	The new
name must be distinguishable and contain the word "corp" "Company" or "Co," may not be used in the name.	poration" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRI	NA ESS)	
		7020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
		, ref.
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 offi	ice address:	
Name of New Registered Agent: NA		
New Registered Office Address:	(F	lorida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accept	the obligations of the position.
	Signature of New Regist	ered Avent 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 De V Mike Je SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	Director	Martha J Baughman	4145 Fairford Drive, New Port Rich 5915 Seaside Dr. New Port Richey,
x Remove			
2) Change Add	Director	Susan J Ray	4145 Fairford Drive, New Port Rich 9668 Springmeadow Dr. New Port
Remove 3) Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
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The date of each amendment date this document was signed.	(s) adoption: Septo	ember 17,2020 —				, if other than the
		0				
Effective date if applicable:	September 17, 202 (no mor	re than 90 days i	after amendm	ent file date)		
Note: If the date inserted in the document's effective date on the	is block does not m ne Department of St	eet the applicab tate's records.	le statutory fil	ling requirements	, this date will no	t be listed as the
Adoption of Amendment(s)	(CHE	CK 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.

٢	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 9-21-2020
	(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)
	Robert H. Langford
	(Typed or printed name of person signing)
	Chairman, Board of Directors, Pasco Fine Arts Council. Inc.
	(Title of person signing)