## N9800003548

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: River City	Repertory Company, I	nc.			<u></u>
N98000003548 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fe-	e are submitted for fili	ng.			
Please return all correspondence concerning	this matter to the follo	owing:			
Kevin Sharbaugh					
	(Name of Co	ontact Person	)		
<del></del>	(Firm/ C	Company)			
Post Office Box 2752					
	(Ad	dress)		<u></u>	
Palatka, Florida 32178					
	(City/ State :	and Zip Code	)	<del> </del>	
reppalatka@gmail.com					
E-mail address: (t	o be used for future ar	nual report n	otification	1)	
For further information concerning this matte	er, please call:				
Kevin Sharbaugh		904 at		501-8487	
(Name of Contact	et Person)	(Arc	a Code)	(Daytime Telephor	ne Number)
Enclosed is a check for the following amount	t made payable to the	Florida Depa	rtment of	State:	
■ \$35 Filing Fee □ \$43.75 Filing Certificate of		Copy il copy is	Certifi Certifi	Filing Fee cate of Status led Copy lional Copy is sed)	
Mailing Address Amendment Section		Street Address Amendment Section			

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

## Articles of Amendment to Articles of Incorporation of

Kiver City Repetiory Company, the,				
(Name of Corporation as currently filed with th	e Florida I	Dept. of State)		
N98000003548		<del></del> _		
(Docur	nent Numb	er of Corporation (if kno	own)	_
Pursuant to the provisions of section 617.1006. Flo amendment(s) to its Articles of Incorporation:	orida Statute	es, this Florida Not For	Profit Corporation adopts th	ne following
A. If amending name, enter the new name of th	e corporat	ion:		
	<u></u>			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 "Inc."
B. Enter new principal office address, if applica	ible:			
(Principal office address MUST BE A STREET)			<u></u>	- <del>γ</del> .
			<u>-</u>	<del></del> >≥ r
				122
C. Enter new mailing address, if applicable:	8.054			
(Mailing address MAY BE A POST OFFICE	<u>BOX</u> )		<del>-</del>	<u></u>
		<del>.</del> .		_ ယ္က
			<u>_</u>	
D. If amending the registered agent and/or regi	stered offic	e address in Florida, e	nter the name of the	
new registered agent and/or the new register	ed office a	ddress:		
Name of New Registered Agent:	R. Kevin	Sharbaugh		
	117 N. 2n	d Street		_
Name Provinces of COCo. Addresses		(Flori	da street address)	
<u>New Registered Office Address:</u>				
	Palatka ————		, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered n. Lam far	Agent: piliar with and accept th	e obligations of the position.	
-		The street of New Arthur Street	of the state of	
	Sig	ynature of New Registere	ed 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	<u>S</u>	Kay E Hope	101 S Bartram Trail San Mateo, FL 32187
Remove			
2) Change Add	<u>T</u>	Robert Stender	131 S Oakland Ave San Mateo, FL 32187
Remove 3) Remove Add Remove	C	R. Kevin Sharbaugh	114 Riverview Drive East Palatka, FL 32131
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			<del></del>
Remove			
		onal Articles, enter change(s) here: essary). (Be specific)	
Article IV - Deleted.			
Article VI - Board of Tr	ustees. Th	ne Board of Trustees will consist of no less than 6	and no more than 12 Trustees.
The manner in which Tr	ustees are	elected or appointed shall be as provided for in t	he bylaws.
Article VII - Deleted.			
Article VIII - Deleted.			

Article IX - Deleted. Article X - Deleted. Article XI - Deleted. The date of each amendment(s) adoption: 15 May 2023 \_\_\_\_\_\_, if other than the date 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 not be listed as the document's effective date on the Department of State's records. 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.

dopted by the board of directors.
Dated  Signature  (Date of Signature)  Signature (Date of Sign
(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)
R. Kevin Sharbaugh
(Typed or printed name of person signing)
Chair
(Title of person signing)

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