P09000072487

| (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
| J. HORNE |
| J. MOTA |
| JAN 20 2023 |
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Office Use Only



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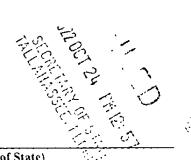
COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | DRATION: PCIT INTERNAT | TIONAL, INC | |
|--|--|---|---|
| DOCUMENT NUM | 1BER: P09000072487 | | |
| | es of Amendment and fee are su | bmitted for filing. | |
| Please return all corr | respondence concerning this ma | tter to the following: | |
| | Beverly Funderburk or Melar | nic Nelson | |
| | | Name of Contact Persor | 1 |
| | PCIT INTERNATIONAL. IN | ∛C | |
| | | Firm/ Company | · · · · · · · · · · · · · · · · · · · |
| | PO Box 1591 | | |
| | | Address | |
| | High Springs, FL, 32655 | | |
| | | City/ State and Zip Cod | 2 |
| | Beverly-Funderburk@ouhsc. | edu | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further informati | ion concerning this matter, pleas | se call: | |
| Beverly Funderburk | | 405 at (| 820-7414 de & Daytime Telephone Number |
| Namo | e of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check | for the following amount made | payable to the Florida Depa | artment of State: |
| S35 Filing Fee | ■\$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Amenc Divisio The C | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



| (Name of Corporation as currently filed with the Florida Dept. of State P09000072487 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the its Articles of Incorporation: | |
|--|---|
| (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the | following amendment(s) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the | following amendment(s) |
| | following amendment(s) |
| · | |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the at "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name mu "chartered," "professional association," or the abbreviation "P.A." | obreviation "Corp.," st contain the word |
| 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: | 1 |
| Beverly Funderburk | |
| Name of New Registered Agent | |
| 2421 NW 182nd St | |
| (Florida street address) | 32669 |
| New Registered Office Address: Newberry , Florida | |
| (City) | (Zip Code) |
| ici,, | ,,,,, C.,,,, |
| 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 | oosition. |
| | |
| Bury W Twoderfish, Pls Sprange of New Registered Agent, if changing | |
| Synature of New Registered Agent, if changing | |

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

| X Change | <u>PT</u> | John Do | <u>ne</u> | |
|-------------------------------|--------------------------|--------------|----------------------|-----------------------|
| X Remove | $\underline{\mathbf{Y}}$ | Mike Jo | ones | |
| X Add | <u>sv</u> | Sally Sr | nith | |
| Type of Action (Check One) | Title | | <u>Name</u> | Address |
| 1) Change | CEO | | Sheila M Eyberg, PhD | 6814 NW 81st Blvd |
| Add | | | | Gainesville, FL 32653 |
| X 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 additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | | | |
|---|--|------------------------------|--|--|
| (Attach adume | onal succes, if necessary, the specific | | | |
| | | | | |
| i August 3, 202 | 22 PCIT INTERNATIONAL unanimously approved adoption of the up | odated bylaws attached here. | | |
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| provisions for | ment provides for an exchange, reclassification, or cancellation of is for implementing the amendment if not contained in the amendmen | ssued snaves. nt itself: | | |
| (if not a | applicable, indicate N/A) | | | |
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