

NO4 00000 2433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

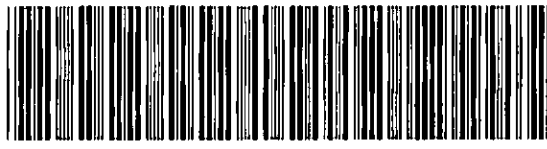
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COURT HOUSE
1100102

Amend

MAR 04 2020
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Dee Dream Foundation

DOCUMENT NUMBER: N04000002433

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ruth Cooper

(Name of Contact Person)

(Firm/ Company)

4541 SW Tabor St

(Address)

Port St Lucie Florida 34953

(City/ State and Zip Code)

cooperamerica@mail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ruth Cooper

561

685-1230

at

(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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 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

Street Address

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

The Dee Dream Foundation Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

NO4000002433

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ *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)

4541 SW Tabor St

Port St Lucie

Florida 34953

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:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address:

(City)

_____, Florida

(Zip Code)

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

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STATE OF FLORIDA
TALLAHASSEE

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:

| | | |
|-----------------|-----------|--------------------|
| <u>X</u> Change | <u>PT</u> | <u>John Doe</u> |
| <u>X</u> Remove | <u>V</u> | <u>Mike Jones</u> |
| <u>X</u> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|---|----------------|---------------------|---|
| 1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add | <u>VP</u> | <u>Barry Cooper</u> | <u>801 S Olive Ave #1521</u> <u>West Palm Beach FL 33401</u> |
| <input checked="" type="checkbox"/> Remove | | | <u>Jesse Wiggins 3709 Savoy Ln WP1</u> |
| 2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add | <u>Sec/Tre</u> | <u>Cyrese Rojas</u> | <u>4541 SW Tabor St</u> <u>Port St Lucie 34953</u> |
| <input checked="" type="checkbox"/> Remove | | | <u>107 Seminole Blvd</u> |
| 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>Sec/Tre</u> | <u>Eva Rose</u> | <u>Lake Park FL 33403</u> |
| 4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |

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E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Article III-The corporation shall be a not for profit.The purpose to grant families stricken my health and financial troubles
a time to create memorable moments through the help of humanity reawakening hope again.Said corporation is organized
exclusively for charitable,religious,educational and scientific purposes.including, for such purposes, the making of distributor
to organizations that qualify as exempt organizations under section 501(c)(3) of The Internal Revenue Code,or the
corresponding section of any future federal tax code.The power of this corporation shall be excercised, it's properties

controlled and its affairs conducted by a Board of Directors. The period of this corporation is perpetual unless dissolved according to law.

The date of each amendment(s) adoption: February-1-2020, if other than the date this document was signed.

Effective date if applicable: February -2-2020
(no more than 90 days after amendment file date)

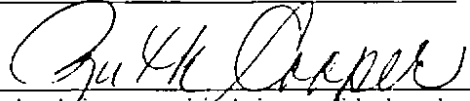
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

- 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 February-1-2020

Signature 

(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)

Ruth Cooper

(Typed or printed name of person signing)

President

(Title of person signing)