## N0700001441

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Emerge USA Foundation, Inc.
N07000011441
OCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Amin Mitha
(Name of Contact Person)
(Firm/ Company)
3425 US Hwy 98 North
(Address)
Lakeland, FL 33809
(City/ State and Zip Code)
amin.mitha@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Farooq Mitha 813 917-4349 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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  \$252.50 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Emerge USA Foundation, Inc.	
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
N07000011441	
(Document Num	aber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Status amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ttion:
Emgage Foundation, Inc.	The new
"Company" or "Co." may not be used in the name.	vation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	ξ)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ZIII APR 17 P
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent:	AMIN MUTHA HEY 98 NORTH
New Registered Office Address:	(Florida street hddress)
<u></u>	City), Florida 3380 9 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for the control of the con	<u>d Agent:</u> Samiliar with and accept the obligations of the position.
	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 <math>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>V</u> <u>Mi</u>	nn <u>Doe</u> ke Jones lly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	**************************************		
Remove	•		
2) Change Add			
Remove 3) Change Add	Maria - Aliabethia		
Remove  Change			
Add			
5) Change Add			
Remove 6) Change			
Add			

E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)			
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		04/07/2017	
[he	date of each amend	ment(s) adoption:	, if other than the
late	this document was si	gned.	
Effe	ective date <u>if applica</u>	ble:	
		(no more than 90 days after amendment file date)	
		in this block does not meet the applicable statutory filing requirements, this day on the Department of State's records.	te will not be listed as the
Ado	option of Amendmen	t(s) ( <u>CHECK ONE</u> )	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendm for approval.	ent(s)
XÍ	There are no member adopted by the boar	rs or members entitled to vote on the amendment(s). The amendment(s) was/wd of directors.	vere
	Dated _	04/08/2017	
		Faroog Mitha	
	ħ	by the chairman or vice chairman of the board, president or other officer-if direction avenute avenute selected, by an incorporator — if in the hands of a receiver, trustee ther court appointed fiduciary by that fiduciary)	
		Farooq Mitha	
		(Typed or printed name of person signing)	e-na-drum
		Director	
		(Title of person signing)	<del></del>