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NOV 27 2017 S. YOUNG TALLAHAUSEE, FLORDA

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	NORTH LAUDERD	ALE FIREFIGHTE	RS' BENEVOI	LENT FUND, INC.	
NI DOCUMENT NUMBER:	6000010671				
The enclosed Articles of Amend	iment and fee are subm	nitted for filing.			
Please return all correspondence	concerning this matte	r to the following:			
D. Marcus Braswell, Jr.					
		(Name of Contact Pe	erson)		
Sugarman & Susskind, P.A.					
		(Firm/ Company	1)	·	
100 Miracle Mile Suite 300					
		(Address)			
Coral Gables, Florida 33134					
		(City/ State and Zip	Code)		
mbraswell@sugarmansusskind	com				
E-ma	il address: (to be used	for future annual rep	ort notification	)	
For further information concerni	ing this matter, please of	call:			
D. Marcus Braswell		at	305	529-2801	
(Na	me of Contact Person)		(Area Code)	(Daytime Telephone No	ımb <b>e</b> r)
Enclosed is a check for the follo	wing amount made pay	able to the Florida I	Department of S	tate:	
□ \$35 Filing Fee	\$43.75 Filing Fee & I Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi S Certifi	Priling Fee cate of Status ed Copy ional Copy is sed)	
Mailing Addi Amendment S		-	eet Address nendment Section	on .	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### Articles of Amendment Articles of Incorporation of

	ber of Corporation (if k	
	ber of Corporation (if k	
orida Statut		nown)
J. 100 J. 100	es, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
e cornorat	tion:	
		The new
	ntion" or "incorporated	d" or the abbreviation "Corp." or "Inc."
able:	N/A	
	) <sub>N/A</sub>	
	N/A	
BOX)	N/A	
	N/A	27.7
	N/A	
stered offi	ce address in Florida.	enter the name of the
red office a	ddress:	
N/A		
N/A		
	(FI	orida street address)
N/A		, Florida
	(City)	(Zip Code)
Registered at. I am fai	Agent: miliar with and accept	the obligations of the position.
	able: ADDRESS  BOX)  istered office in N/A  N/A  N/A  Registered in I am fa	ne corporation:  Id "corporation" or "incorporated at a section at a 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)

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>	Name		<u>Addres</u> s
1) Change		N/A	<del></del>	
Add				
Remove				
2) Change		N/A	<u> </u>	
Add				
Remove				
3) Change		N/A	<del></del>	
Add				**
Remove				
4) Change		N/A		
Add				
Remove				
5) Change		N/A		
Add				
Remove				
6)Change		N/A		
Add				
Remove			_	

## E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

#### ARTICLE III SHALL BE AMENDED TO READ AS FOLLOWS:

		N/A	
The	e date of each amend	dment(s) adoption:	if other than the
date	e this document was s		,
		N/A	
LIT	ective date <u>if applic</u> s		<del></del>
		(no more than 90 days after amendment file date)	
Not loc	te: If the date inserted ument's effective date	d in this block does not meet the applicable statutory filing requirements, this date will not be e on the Department of State's records.	listed as the
Ado	option of Amendmen	ot(s) (CHECK ONE)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
	There are no membe adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were red of directors.	
	Dated _	10/28/2017	
	Signature_	Churchest	
	(E	By the chairman or vice chairman of the board, president or other officer-if directors	
		nave not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	•	and court appointed inductary by that inductary)	
		Christy Lev X1str (Typed or printed name of person signing)	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	