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### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO		O BROTHER'S FOU	NDATION,	INC.	
DOCUMENT NUMBER: _		N17000001128			
The enclosed Articles of Am	endment and fee are subn	nitted for filing.			
Please return all corresponde	nce concerning this matte	r to the following:			
Damia	ın O. Novo				
		(Name of Contact Per	son)		
Novo B	rothers Foundation Inc.				
·		(Firm/ Company)			
4990 SW	72nd Avc., Suite 111				
		(Address)			<del></del>
Miami, F	L 33155				
		(City/ State and Zip Co	ode)		
acdemy(	@novobrothers.com				
E-	mail address: (to be used	for future annual repor	rt notification	1)	
For further information conce	eming this matter, please of	call:			
Damian O. Novo		a)	239	919-0474	
(	Name of Contact Person)		Area Code)	(Daytime Telephone N	umber)
Enclosed is a check for the fo	llowing amount made pay	able to the Florida De	partment of	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status icd Copy iconal Copy is esed)	
Mailing 1	No allino Adduson				

#### 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

FILED

2018 OCT 29 PM 12: 19

NOVO BROTI	HER'S FOUNDATION, INC.			
(Name of Corporation as curren	tly filed with the Florida Bent, of State SSEE, FL			
N17000	001128			
(Document Numb	er of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following			
A. If amending name, enter the new name of the corporati	ion:			
NOVO BROTHERS FOUNDATION INC.	The new			
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."			
B. Enter new principal office address, if applicable:	4990 SW 72nd Ave			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Suite 111			
	Miami, FL 33155			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4990 SW 72nd Ave			
	Suite 111			
	Miami, FL 33155			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a				
Name of New Registered Agent:				
New Registered Office Address:	(Florida street address)			
	Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: niliar with and accept the obligations of the position.			
Si	gnature 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 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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<del></del>		
Add			
Remove			
2) Change			
Add			
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sh	ing additional Artic rets, if necessary).	(Be specific)				
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The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective date if applicable:
tno 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
Signature
(By the chateman of 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)
Dennis Novo
(Typed or printed name of person signing)
President
(Title of person signing)