## 703186

(Requestor's Name)				
(Address)				
(Address)				
(City	//State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Nan	ne)		
(Dod	cument Number)			
Certified Copies	Certificates	of Status		
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07/17/15--01017--014 \*\*35.00







July 21, 2015

DEBBIE KOMANSKI ALBIN POLASEK FOUNDATION, INC. 633 OSCEOLA AVE. WINTER PARK, FL 32789

SUBJECT: ALBIN POLASEK FOUNDATION INC.

Ref. Number: 703186

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Letter Number: 315A00015228

Cheryl R McNair Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Albin Polasek Foundation, Inc. NAME OF CORPORATION:	
703186 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Debbie Komanski	
(Name of Contact Person)	
Albin Polasek Foundation, Inc.	
(Firm/ Company)	
633 Osceola Avenue	
(Address)	
Winter Park, FL 32789	
(City/ State and Zip Code)	, , , , , , , , , , , , , , , , , , ,
dkomanski@polasek.org	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Carynn Jackson 407 6	47-6294
	Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of Stat	e:
(Additional copy is Certified	e of Status Copy al Copy is
Mailing AddressStreet AddressAmendment SectionAmendment Section	

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 to Articles of Incorporation of

	ΟĬ	<b>3</b> *
Albin Polasek Foundation, Inc.		FLED
(Name of Corporatio	n as currently filed with the Florida De	ot. of.State)
703186		ZTHO AUG 20 PM 1: 40
(Docu	ument Number of Corporation (if known)	THE STATE STATE
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not For Profit</i>	
A. If amending name, enter the new name of the	e corporation:	
		The new
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nan		abbreviation "Corp." or "Inc."
Company or Co. may not be used in the nam	<u>.e.</u> .	
B. Enter new principal office address, if applic		
(Principal office address <u>MUST BE A STREET</u> )	ADDRESS )	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE</u>	<u></u>	
	-	
D. If amending the registered agent and/or regi		ne name of the
new registered agent and/or the new registe	····	
Name of New Registered Agent:	Robert Sharpstein	
-	2628 W. Fairbanks Avenue	## .
	(Florida street address)	
New Registered Office Address		,
	Winter Park	Florida 32789
	(City)	(Zip Code)
Vary Desirators I American Circumstance of the second	Daniel daniel de la control	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		pations of the position
	M. Carpet	sanoni oj ine polition.
-	Signature of New Registered Age	ent if changing
		/· *** */ WINGIA ****

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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<del></del>		
Remove			
2) Change			
Add		•	<del>4-74-14.2</del>
Remove			<del></del>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(i) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)					
				<u></u>	
		_			
	_				
				···	

	The date of each amendment(s) adoption:	, if other than the
	,	
	Effective date <u>if applicable</u> : , (no more than 90 days after a	mendment file date)
	Note: If the date inserted in this block does not meet the applicable state locument's effective date on the Department of State's records.	utory filing requirements, this date will not be listed as the
٩d	Adoption of Amendment(s) (CHECK ONE)	
A	The amendment(s) was/were adopted by the members and the numl was/were sufficient for approval.	per of votes cast for the amendment(s)
	There are no members or members entitled to vote on the amendme adopted by the board of directors.	ent(s). The amendment(s) was/were
	7/14/15 Dated	
	Signature Magnatur	
	(By the chairman or vice chairman of the board, have not been selected, by an incorporator — if i other court appointed fiduciary by that fiduciary	n the hands of a receiver, trustee, or
	Robert Sharpstein	
	(Typed or printed na	me of person signing)
	President	
	(Title of )	person signing)