706503

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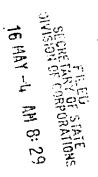
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION | National Society to P | revent Blindness, | Florida Affil | nate, Inc. | |
|--------------------------------------|--|---------------------|---------------|---|--|
| 7(DOCUMENT NUMBER: | 06503 | | | | |
| The enclosed <i>Articles of Amer</i> | adment and fee are subm | nitted for filing. | | | |
| Please return all corresponden | ce concerning this matter | to the following: | | | |
| Joanne Lighter | | | | | |
| | (| Name of Contact | Person) | | |
| National Society to Prevent B | indness, Florida Affiliat | e, Inc. | | | |
| | | (Firm/ Compa | any) | | |
| 9200 Seminole Boulevard - Se | cond Floor | | | | |
| | | (Address) | | | |
| Seminole, FL 33772 | | | | | |
| | (| City/ State and Zi | p Code) | 100000000000000000000000000000000000000 | |
| jlighter@preventblindnessfl.o | g | | | | |
| E-n | ail address: (to be used | for future annual r | eport notific | ation) | |
| For further information concer | ning this matter, please c | all: | | | |
| Joanne Lighter | | | 813 at | 874-2020 x4024 | |
| ۷) | ame of Contact Person) | | | de) (Daytime Telephone Number) | |
| Enclosed is a check for the foll | owing amount made pay | able to the Florida | a Department | of State: | |
| □ \$35 Filing Fee I | ■\$43.75 Filing Fee & C Certificate of Status | | y is Co | 52.50 Filing Fee ertificate of Status ertified Copy additional Copy is nclosed) | |

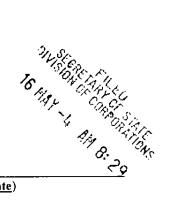
Mailing Address

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



National Society to Prevent Blindness, Florida Affiliate, Inc.

| (Name of Corporation | as current | y filed with the Flo | rida Dept. of S | State) |
|--|--|--|----------------------|---------------------------------------|
| 706503 | | | | |
| (Docur | nent Number | r of Corporation (if | known) | |
| Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation: | rida Statutes | , this <i>Florida Not F</i> | or Profit Corpo | oration adopts the following |
| A. If amending name, enter the new name of the Preserve Vision Florida, Inc. | e corporatio | <u>n:</u> | | Th., |
| name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam | | on" or "incorporate | ed" or the abbr | The new eviation "Corp." or "Inc." |
| B. Enter new principal office address, if applica | ıble: | 9200 Seminole Boulevard - Second Floor | | |
| (Principal office address MUST BE A STREET ADD | | Seminole, FL 33772 | | |
| | • | | | · |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) | BOX) | | . | |
| D. If amending the registered agent and/or regis | stered office | address in Florida | , enter the nan | ne of the |
| new registered agent and/or the new register | ed office ad | <u>dress:</u> | | |
| Name of New Registered Agent: | Joanne Olv | era Lighter | | |
| | 9200 Seminole Boulevard - Second Floor | | | |
| <u>New Registered Office Address:</u> | | a | Florida street addre | ess) |
| | Seminole | | • | , Florida |
| | | (City) | | (Zip Code) |
| New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen | | | t the obligation | s of the position. |
| | 1 | Jame & | Lter | |
| | Sig | nature of New Regi: | stered 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: XChange X Remove X Add | <u>PT</u> <u>V</u> <u>SV</u> | John Do Mike Jo Sally Sn | <u>nes</u> | |
|---------------------------------|------------------------------|--------------------------------|------------|--|
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s |
| 1) Change | | | | |
| Add | | ; | | |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | mere and |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | A Control of the Cont |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| ar · · · |
|---|
| |
| [delete] National Society to Prevent Blindness, Florida Affiliate, Inc. [substitute] Preserve Vision Florida, Inc. |
| "Pursuant to Section 617.1006 [delete .0201]" |
| "hereafter known as Preserve Vision Florida, Inc." |
| ARTICLE I. "changed from National Society to Prevent Blindness Florida Affiliate, Inc. to Preserve Vision Florida, Inc." |
| ARTICLE III. [delete] "5. National Society: To secure support for achieving the objective of the National Society." |
| ARTICLE V. {delete] "shall be distributed to the National Society to Prevent Blindness" [substitute] "distribute to not for |
| profit organizations of like purpose, provided that if these organizations shall elect not to accept" |
| ARTICLE XI. [delete] "Sarah Jordan-Holmes. 1211 N. Westshore Blvd., Suite 204, Tampa Florida 33607 |
| [substitute] Joanne Olvera Lighter, 9200 Seminole Blvd Second Floor, Seminole, FL 33772" |
| [delete] December, 1993" [substitute] "was adopted on the 20th day of April, 2016" |
| Date: [delete] "December 20, 1993 National Society to Prevent Blindness, Florida Affiliate" |
| Date: [substitute] "April 20, 2016 Preserve Vision Florida, Inc. |
| [delete] "Sarah Jordan-Holmes" [substitute] "Joanne Olvera Lighter |
| CERTIFICATE DESIGNATING REGISTERED OFFICE |
| [delete] "National Society to Prevent Blindness, Florida Affiliate, Inc." [substitute] "Preserve Vision Florida, Inc." |
| [delete] "1211 N. Westshore Blvd., Suite 204, Tampa, FL 33607" [substitute] "9200 Seminole Boulevard - Second Floor, |
| Seminole, FL 33772" |
| [delete] "Sarah Jordan-Holmes [substitute] "Joanne Olvera Lighter" |
| ACKNOWLEDGMENT [delete] 20th day of December, 1993" [substitute] "20th day of April, 2015 |
| [delete] "Sarah Jordan-Holmes" [substitute] "Joanne Olvera Lighter" |

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

| , • | April 20, 2016 | |
|---------------------------------------|---|---------------------|
| The date of each amendment(| s) adoption: | , if other than the |
| late this document was signed. | • | |
| • | May 12, 2016 | |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| | | |
| | is block does not meet the applicable statutory filing requirements, this date will not | be listed as the |
| locument's effective date on th | e Department of State's records. | |
| Adoption of Amendment(s) | (CHECK ONE) | |
| taoption of Amenament(s) | (CHECK ONE) | |
| ■ The amendment(s) was/we | ere adopted by the members and the number of votes cast for the amendment(s) | |
| was/were sufficient for ap | | |
| vias viere samerem for ap | 707411 | |
| There are no members or i | members entitled to vote on the amendment(s). The amendment(s) was/were | |
| adopted by the board of d | | • |
| | | • |
| April 2 | 20, 2016 | |
| Dated | | |
| | | |
| | from Alleton | |
| Signature | Journey 1900 | |
| | charman or vice chairman of the board, president or other officer-if directors | |
| | ot been selected, by an incorporator - if in the hands of a receiver, trustee, or | |
| other c | ourt appointed fiduciary by that fiduciary) | |
| _ | | |
| Joan | nne Lighter | |
| - | (Typed or printed name of person signing) | 7 |
| | (Typed of printed flame of person signing) | |
| | • | |
| Drai | sident & CEO | |
| FIC | nuent & CLO | |
| | (Title of person signing) | |
| | (| |