

766842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

(Business Entity Name)

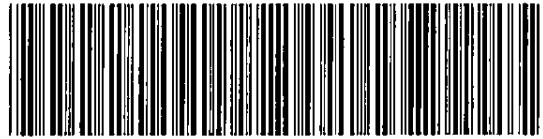
(Document Number)

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SOUTH FLORIDA
TALLAHASSEE FL

AB

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Schultz Foundation

DOCUMENT NUMBER: 704842

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bronwyn Kelley
(Name of Contact Person)

CG Schultz Capital LLC
(Firm/ Company)

118 W. Adams St. Suite 600
(Address)

Jacksonville FL 32202
(City/ State and Zip Code)

dawn@schultzinv.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bronwyn Kelley at 904-354-3603 x-310
(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:

- | | | | |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

The Schultz Foundation, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

706842

(Document Number of Corporation (if known))

FILED

2024 APR 16 AM 7:52

CLERK OF THE STATE
TALLAHASSEE, FL

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar 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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	<u>VP, T</u>	<u>Bronwyn Kelley</u>	<u>118 W. Adams St Suite 600</u> <u>Jacksonville FL 32202</u>
2) ___ Change ___ Add	<u>VD</u>	<u>Frederick H. Schultz Jr.</u>	<u>118 W. Adams St, Suite 600</u> <u>Jacksonville, FL 32202</u>
3) <input checked="" type="checkbox"/> Remove ___ Change <input checked="" type="checkbox"/> Add ___ Remove	<u>D</u>	<u>Caitlin Kelley</u>	<u>118 W. Adams St. Suite 600</u> <u>Jacksonville, FL 32202</u>
4) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	<u>S</u>	<u>Heegan Kelley</u>	<u>118 W. Adams St., Suite 600</u> <u>Jacksonville, FL 32202</u>
5) ___ Change ___ Add ___ Remove	___	___	___
6) ___ Change ___ Add ___ Remove	___	___	___

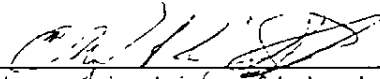
E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

☒ 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 4/8/24

Signature 
(By the chairman or 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)

Clifford G. Schultz, II
(Typed or printed name of person signing)

President
(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 2, 2024

BRONOYN KELLEY
118 W. ADAM ST.
SUITE 600
JACKSONVILLE, FL 32202

SUBJECT: THE SCHULTZ FOUNDATION, INC.
Ref. Number: 706842

We have received your document for THE SCHULTZ FOUNDATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

✓ Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 624A00007033

Rec. 4/16