## N0000008270

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SECRETARY OF STATEMS
DIVISION OF AM 8:58

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: The Acorn Fo	undation	
DOCUMENT NUN	1BER: <u>N00000008270</u>		***
The enclosed Article	es of Amendment and fee are sub	omitted for filing.	
Please return all corr	respondence concerning this mat	ter to the following:	
		BrookeHarte  Contact Person)	
	(Name of	Contact Person)	
	The Acc	orn Foundation	
	(Firm	n/ Company)	
	P.C	). Box 333	
		Address)	
	<del></del>	ane, NY 13833 Ite and Zip Code)	
	(City) Sta	ne and zip code)	
		rte@stny.rr.com	
	•	d for future annual report notific	ation)
For further informati	on concerning this matter, pleas	e call:	
Jan BrookeHarte	•	at ( 607 ) 656-484	14
(Name	of Contact Person)		me Telephone Number)
Enclosed is a check	for the following amount made p	payable to the Florida Departmen	t of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☑ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporation Clifton Building	ons
Tallahassee, FL 32314		2661 Executive Cente Tallahassee, FL 3230	

## **Articles of Amendment** Articles of Incorporation of

The Acc	rn Foundat	ion			
(Name of Corporation as curre	ntly filed with	the Florida Dept. of Sta	te)		
N0000008270					
(Document Num	ber of Corporat	ion (if known)	<del></del>		
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In-		, this <i>Florida Not For Pr</i>	ofit Corporation adopts		
A. If amending name, enter the new name of	the corporatio	<u>n:</u>			
The new name must be distinguishable and co	Foundation	A SSOCIATION,	INC.		
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" or	ntain the word r "Co." may not	"corporation" or "inco be used in the name.	rporated" or the		
B. Enter new principal office address, if applicable:		1 W. Juliand Hill Rd	. #C		
(Principal office address <u>MUST BE A STREE</u>		Greene, NY			
		13778			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 333			
		Port Crane, NY	- North-		
		13833			
D. If amending the registered agent and/or renew registered agent and/or the new regis			er the name of the		
Name of New Registered Agent:	(u	nchanged)	_		
•	5427 1	Eagle Claw Dr.			
New Registered Office Address:	(Flori	da street address)	<del>-</del>		
	Po	ort Orange	_, Florida_32124		
		(City)	(Zip Code)		

New Registered Agent's Signature, it 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)

<u>Tiile</u>	<u>Maine</u>	Address	Type of Action
Dir.	Dr. Michael Krembs	17 Mitchell Ave. Binghamton, NY 13903	
Dir.	Major Ronald Lee	4600 Amherst Ave. Vestal, NY 13850	☑ Add □ Remove
Dir.	Rene Brosnan	2508 Saddlebrook Vestal, NY 13850	
	nding or adding additional Articles, additional sheets, if necessary). (Be		
Amendir	ng the Incorporation Name only:		
		To - The Foundation ASS	ociation, INC
	(2)		
			····
			, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>

The date of each amendmen	t(s) adoption: June 30, 2009
Effective date <u>if applicable</u> :	June 30, 2009 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_June	e 29, 2009
Signature	In Froshe Jaule
(B) hay	the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, over court appointed fiduciary by that fiduciary)
	Jan BrookeHarte
	(Typed or printed name of person signing)
	CEO/President
	(Title of person signing)

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