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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ENTERPRISE CHA	ARLOTTE FOUNI	OITAC	N, INC		
	N02000002870					
DOCUMENT NUMBER:						
The enclosed Articles of An	nendment and fee are sub	mitted for filing.				
Please return all correspond	ence concerning this matt	er to the following	;;			
JAMES COALWELL						
,		(Name of Contact	t Person	1)		
CENTENNIAL BANK						
		(Firm/ Comp	any)			
401 TAYLOR STREET						
		(Address)			
PUNTA GORDA, FLORID)A 33950					
		(City/ State and Z	ip Code	:)		
EDPCHARCO@GMAIL.C	ОМ					
I	-mail address: (to be used	for future annual	report n	otification)	
For further information cond	erning this matter, please	call:				
KENNA HUBAI			575		442-2048	
	(Name of Contact Person				(Daytime Telephone N	umber)
Enclosed is a check for the t	ollowing amount made p	ayable to the Florid	da Depa	rtment of	State:	
□ \$35 Filing Fee	₹¥\$43.75 Filing Fee & Certificate of Status	S43.75 Filing F Certified Copy (Additional copenclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	

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 οf

to Articles of Incorporation of	
of	3
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ENTERPRISE CHARLOTTE FOUNDATION, INC	~
Same of Corporation as currently filed with the Florida Dept. of State)	
N02000002870	
(Document Number of Corporation (if known)	
ursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts thendment(s) to its Articles of Incorporation:	he following
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. Company" or "Co." may not be used in the name.	" or "Inc."
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
. 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;	
(Elouda street address)	
(Florida street address) New Registered Office Address:	

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 John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	DT	ERIC LOCHE	5199 COLLINGSWOOD BLVD PORT CHARLOTTE, FL 33948
× Remove			
2) × Change Add	DP	JAMES COALWELL	401 TAYLOR STREET PUNTA GORDA, FL 33950
Remove 3) Remove Add Remove	~		CURRENTLY ERIC LOCHE IS THE TREASURER AND NEEDS TO BE REMOVED FROM THIS ROLE. JAME COALWELL WHO
4) Change Add			IS CURRENTLY PRES/DIR WILL ASSUME THIS ROLE
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove E. If amending or adding	ng additional <u>Art</u>	Page 2 of 4 icles, enter change(s) here:	
(attach additional shee			
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	Page 3 of 4		
The date of each amendment(s) adoption date this document was signed.	:		, if other than the
Effective date if applicable:	no more than 90 days after amendi		
	no more than 90 days after amendi	ment file date)	
Note: If the date inserted in this block doe document's effective date on the Departme	s not meet the applicable statutory int of State's records.	filing requirements, this date v	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted		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 17/20/19
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)
THMES M COACWELL (Typed or printed name of person signing)
PREGIONE

(Title of person signing)