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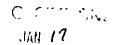
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	OUNDATION, INC.		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this n	atter to the following:		
CHARLES H. STARK			
	(Name of Contact Person)		
CHARLES H. STARK, P.A.			
	(Firm/ Company)		
312 N. PARK AVE., SUITE 2-A			
	(Address)		
WINTER PARK, FL 32789			
	(City/ State and Zip Code)		
ANNUALREPORT@ATTORNEYSTARK.COM			
E-mail address: (to be t	sed for future annual report notification)		
For further information concerning this matter, ple	ase call:		
CINDEE MICHNIEWICZ	407 at	788-0250	
(Name of Contact Per		(Daytime Telephone Number)	
Enclosed is a check for the following amount mad	payable to the Florida Department of St	sate:	
\$35 Filing Fee \$43.75 Filing Fee Certificate of State	us Certified Copy Certific (Additional copy is Certifie	Filing Fee rate of Status ed Copy onal Copy is ed)	
Mailing Address	Street Address	_	
Amendment Section Division of Corporations		mendment Section ivision of Corporations	
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle		nter Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE OLIVER FOUNDATION, INC.

(Name of Corporation as curren	tly filed with the Flo	rida Dept, of State)
N02000003656		
(Document Numb	er of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006. Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:	
SHERRY CHAPPELL COOPER FOUNDATION, INC.		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporate	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		.9
	 	
C. Enter new mailing address, if applicable:	N/A	<i>द</i>
(Mailing address MAY BE A POST OFFICE BOX)	1974	<u> </u>
		<i>Q</i>
		2
	4-174	
 If amending the registered agent and/or registered office new registered agent and/or the new registered office a 		enter the name of the
N/A	<u> </u>	
Name of New Registered Agent:		
	(F	lorida sireei oddress)
New Registered Office Address:	,,	or the service of the
N/A		, Florida
 -	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		the obligations of the position.
Si	ignature of New Regis	tered 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: \underline{X} Change \underline{X} Remove \underline{X} Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) N/A Change		_		
Add			<u> </u>	<u>.</u>
Remove				? ?
2) Change				= .
Add				
Remove				ரு 2
3) Change				
Add				-w.
Remove				<u>.</u>
4) Change				
Add				
Remove				
5) Change				
Add				<u> </u>
Remove				
6) Change				1-177
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
N/A			
,	<u> </u>		
	us:		
			
	= =====================================		
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	100		

	e date of each amendment(s) adoption:e this document was signed.	, 11 other than 1
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wil ument's effective date on the Department of State's records.	l not be listed as the
Ade	option of Amendment(s) (CHECK ONE)	
	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.	
	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) JAMES FENIMORE COOPER, JR. (Typed or printed name of person signing) DIRECTOR	19 July 14 pt 9: 52
	(Title of nerson signing)	