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SECRETARY OF STATE,
TALLAHASSEE, FLORID,

Amend

MAR 1 3 2012 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ARNR 6	DUCATION FOUNDATION
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this matter	ter to the following:
DONALD SLOAN	
	(Name of Contact Person)
	(Firm/ Company)
2107 TOBAGO CIR	
	(Address)
2107 TOBAGO CIR FT MYERS, FL 33	(City/ State and Zip Code)
	(City/ State and Zip Code)
DKS LOAN & AOL. C E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	e call:
DONALD SLOAN	at (<u>239</u>) <u>693-5188</u> (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee \$\&\text{Certificate of Status}\$	Certified Copy (Additional copy is enclosed) \$\int \frac{1}{2}\$43.75 Filing Fee & \$\int \frac{2}{2}\$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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

Articles	of
THE AANR EDUCATE	ON FOUNDATION, INC.
(Name of Corporation as currently filed with the Flor	ida Dept. of State)
(Document Number of Corpora	tion (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>m:</u>
MA	The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	~
	Por S
C. Enter new mailing address, if applicable:	1/4 SA 10 F
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	— A T
	ZMAR-9 PH 4: 07 ECRETARY OF STATE ECRETARY OF STATE ALLAHASSEE, FLORIT
D. If amending the registered agent and/or registered office	· · · · · · · · · · · · · · · · · · ·
new registered agent and/or the new registered office ad	dress:
Name of New Registered Agent: James	Smock, Jr.
1703 N. /	Main St.
Maria Brainsan 2005 or 4 / Lange	florida street address)
New Registered Office Address:	24744
M/SSIMM (City)	70e Florida 34744 (Zip Code)
New Registered Agent's Signature, if charging Registered A I hereby accept the appointment as registered agent. I am fam.	ilion with and accept the obligations of the position
Jan Sull	A - Executive Director
Signature of New Registe.	red Agent, if changing
<i></i>	nera 1 of A

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	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change Add Remove		-		
2) Change Add Remove				
3) Change Add Remove		<u> </u>		
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Change Add Remove				

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The date of each amendment(s) adoption: 18 FEBRUARY 2012
Effective date if applicable: IMMEDIATE
(no more than 90 days after amendment file date)
Adoption 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.
Dated 7 MARCH ZUIZ Signature Douald K Sloan TREASURER
Signature Bouald K Stoan, TREASURER
(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)
DONALD K SLOAN
(Typed or printed name of person signing)
TREASURER
(Title of person signing)