N020000006467

(Re	questor's Name)	,
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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2012 APR 10 PH 2: 23
SECHETARY OF STATE
SECHETARY OF STATE



March 13, 2012

KATHLEEN MCPEAK ALHAMBRA FOUNDATION, INC. 615 OLD LANCASTER AVE BRYN MAWR, PA 19010

SUBJECT: ALHAMBRA FOUNDATION, INC.

Ref. Number: N02000006467

We have received your document for ALHAMBRA 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):

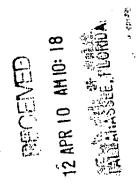
Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Tina Roberts Regulatory Specialist II

Letter Number: 712A00009206



ALHAMBRA FOUNDATION, INC.

March 5, 2012

State of Florida Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: ALHAMBRA FOUNDATION, INC.

N02000006467 Amendment Filing

Dear Sir or Madam:

Enclosed for filing is ALHAMBRA FOUNDATION, INC.'s amendment to its Articles of Incorporation along with a check in the amount of Thirty Five Dollars (\$35.00) as payment for the filing fee related to this.

Also enclosed is a return self-addressed stamped envelope for the return of the date stamped copy of the amendment acknowledging receipt and acceptance by the Florida Secretary of State.

Should you have any questions related to this filing, please contact me at 610-520-7365.

Thank you.

Sincerely.

Kathleen McPeak

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	OUNDATION, IN	C.
N0200006467 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
•	•	
Please return all correspondence concerning this mat	tter to the following:	
Kathleen McPeak		
	(Name of Contact Po	erson)
ALHAMBRA FOUNDATION, INC.		
	(Firm/ Company	/)
615 Old Lancaster Ave.		
	(Address)	
Bryn Mawr, PA 19010		
	(City/ State and Zip	Code)
kmcpeak@avalonfinancialgr	p.com	
E-mail address: (to be use	ed for future annual rep	ort notification)
For further information concerning this matter, please	e call:	
Kathleen McPeak	610	5207365
(Name of Contact Person)	(Are	a Code & Daytime Telephone Number)
Enclosed is a check for the following amount made p		
\$35 Filing Fee \$\square\$\$\$\$\square\$	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Cli	eet Address lendment Section vision of Corporations fton Building 11 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

ALHAMBRA FOUNDATION, INC.		
ALIAMBRAT CONDATION, INC.	2012 APR 10 PM 2: 23	
(Name of Corporation as currently filed with the I	Florida Dept. of State)	
N02000006467	SEURETARY OF STATE Operation (if known)	
(Document Number of Corp	poration (if known)	
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corpor	ration: The ne	
name must be distinguishable and contain the word "corpo	ration" or "incorporated" or the abbreviation "Corp." or "Inc.	
"Company" or "Co." may not be used in the name.		
D. Enter new naive including address if aunticable.	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.)	(5)	
• •	THE !	
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
•		
D. If amending the registered agent and/or registered of		
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:	1 Ionaa sireer aaaressy	
	W. 11	
(Cit)	y) (Zip Code)	
(Cii)	(Lip Cour)	
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the obligations of the position.	
Signature of New Reg	gistered 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: X Change	<u>PT</u> <u>Jol</u>	nn Doe	
X Remove	<u>V Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	DVP	John Imbres	10792 El Paraiso Place Delray Beach FL
2) Change Add Remove			
3) Change Add Remove		 	
4) Change Add Remove		·	
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) Article IV of the Articles of Incorporation is amended to state:				
The purpose of Alhambra Foundation is the development, operation, and maintenance of culture specific humanitarian needs of education, healthcare and infrastructure,				
herein to the contrary, the purposes of this corporation are limited to exclusively to				
exempt purposes within the meaning of Section 501 (c) (3) of the Internal Revenue				
Code.				
·				

Th	date of each amendmen	March 1, 2012 t(s) adoption:		
Effective date <u>if applicable</u> :		March 1, 2012		
	<u></u>	(no more than 90 days after amendment file date)		
Ada	option of Amendment(s)	(CHECK ONE)		
	The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) pproval.		
A	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	ch 5, 2012		
	(By 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, or court appointed fiduciary by that fiduciary)		
	Patricia C). Young		
		(Typed or printed name of person signing)		
	Director a	and Senior Vice President		
		(Title of person signing)		