## N0200007306

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## **COVER LETTER**

T0: Amendment Section
Division of Corporations

NAME OF CORPORATION: IT Women Charitable Foundation, Inc.			
DOOUBLENT NUMBER	N02000007306		
DOCUMENT NUMBER:	1402000007000		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of An	nendment and fee are sub	mitted for filing.	
Please return all corresponde	ence concerning this matte	er to the following:	
Victoria Usherenko			
		(Name of Contact Pers	on)
ITWomen Charitable	Foundation Inc	•	
		(Firm/ Company)	
3370 NE 190th street	;, Ste 3811		
		(Address)	
Aventura, FL 33180			
		(City/ State and Zip Co	ode)
6			
	twomen.org -mail address: (to be used	for future annual renov	t notification)
	·	•	t notification)
For further information conc	erning this matter, please	call:	
Victoria Usherenko	· · · · · · · · · · · · · · · · · · ·		936-9091
(Name of Co	ntact Person)	(Area	Code & Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida De	partment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
	Certificate of Status		Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is
			Enclosed)
Mailing A	ddress	Stree	t Address
Amendment Section		Amendment Section	
Division of Corporations			ion of Corporations
P.O. Box 6327			on Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed		
N02000007306		
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, F amendment(s) to its Articles of Incorporation:	lorida Statutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of t	he corporation:	
N/A		The new
name must be distinguishable and contain the wo "Company" or "Co." may not be used in the na		
B. <u>Enter new principal office address, if appli</u> (Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC)  D. If amending the registered agent and/or re	gistered office address in Florida, er	13 DEC - 6 THE 38 OF STARS OF
new registered agent and/or the new regist	ered office address:	
Name of New Registered Agent: N/A	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address.	(Florida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		e obligations of the position.
Signa	ature of New Registered Agent, if char	ngina

Page 1 of 4

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 D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>s</u>	Sherry Giordano	3370 NE 190th Street
Add			Ste 3811
X Remove			Aventura, FL 33180
2) Change			***************************************
Add			
Remove			<del></del>
3) Change	<del></del>		
Add			
Remove			<del> </del>
4) Change			
Add			
Remove			
<b>*</b> 1 01			
5) Change			
Add			
Remove			All the transfer of the state o
6) Change			
Add			
Remove			

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

The date of each amendment date this document was signed.	· · · · · · · · · · · · · · · · · · ·	, if other than the
Effective date <u>if applicable</u> :	December 3, 2013	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	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 d	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
Dated	12 13 / 13 Viene theres	
(By the have n	chairman or vice chairman of the board, president or other officer-if directors ot been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	_
Victoria U	sherenko	
	(Typed or printed name of person signing)	
President		
<del></del>	(Title of person signing)	