N03000004591

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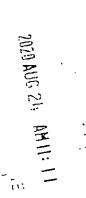


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TO: Amendment Section
Division of Corporations

Josephine NAME OF CORPORATION:	Staggers Waterman Scholarship. Inc.
N0300000459	1
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Sara J. Cason	
	(Name of Contact Person)
	(Firm/ Company)
1010 NW 182nd Street	
	(Address)
Miami, FL 33169	
	(City/ State and Zip Code)
sjcason@comcast.net	
E-mail address: (to be used for future annual report notification)
For further information concerning this matt	er, please call:
Sara J. Cason	305 776-3554
(Name of Conta	
Enclosed is a check for the following amour	it made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filin Certificate o	g Fee & S43.75 Filing Fee & S52.50 Filing Fee f Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

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

Josephine Staggers Waterman Scholarship, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N03000004591 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. 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: (Florida street address) New Registered Office Address: , Florida _ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add		<u></u>	
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		nal Articles, enter change(s) here: ssary). (Be specific)	
Article VIII			
The property of the cor	poration	s irrevocably dedicated to charitable a	nd educational purposes and no part of the
net income or assets of	f the Cor	poration shall ever inure to the benefit of	of any director, officer, or member thereof
or to the benefit of any	private p	erson. Upon dissolution or winding up	of the Corporation, its assets remaining
after payment, or provis	sion for c	avment, of all debts and liabilities of th	e Corporation shall be distributed to a

non-profit fund, foundation or cor	rporation which is organized and operated exclusively for charitable, comm	unity
Development, and educational p	urposes and which has established its tax exempt status under Section	
501 (C) (3) of the Internal Reven	ue Code.	
		
		
		
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The date of each amendment(s) as date this document was signed.	doption:	if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be epartment of State's records.	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.	

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	August 11, 2020
Dated	
Signatur	
	(By the chairman or vide 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)
	other court appointed fiduciary by that fiduciary) Sara J. Cason
	Sara J. Cason

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were