# N03000008464

(Re	equestor's Name)	)
(Ad	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Во	usiness Entity Na	me)
(De	ocument Number	)
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE

FILED

NC

TBrawn 7-12-11

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Tampa Bay H	eart Foundation Inc	
DOCUMENT NUM	BER: N0300008464		
The enclosed Article.	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Amy	y L. Harcar	
	(Name of	Contact Person)	
	Florida Hea	art Foundation Inc	
	(Firm	n/ Company)	
	111 2nd A	ve NE Suite 900	
	(4	Address)	
	St. Petersbu	rg, FL 33701-3474	
	(City/ Sta	te and Zip Code)	- · ·
		ohfoundation.org d for future annual report notific	cation)
For further information	on concerning this matter, please	•	,
Amy L. Harcar		at ( 727 ) 522-93	79
<del></del>	of Contact Person)	at ( 727 522-93 (Area Code & Dayti	ime Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departmen	nt of State:
□ \$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	er Circle



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 23, 2011

AMY L HARCAR FLORIDA HEART FOUNDATION INC 111 2ND AVE NE STE 900 ST PETERSBURG, FL 33701-3474

SUBJECT: TAMPA BAY HEART FOUNDATION, INC.

Ref. Number: N03000008464

We have received your document for TAMPA BAY HEART FOUNDATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 711A00015163

#### Articles of Amendment to Articles of Incorporation of



# Tampa Bay Heart Foundation, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

### N03000008464

(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:

n" or "incorporated" or the ne name.
lorida, enter the name of the
ress)
, Florida
(Zip Code)

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<del></del>		
<del></del>			
E. If amer	nding or adding additional Art additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	

The date of each amendment(s) ad	loption: April 27, 2011
,	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were
Dated June 7, 2	011
Signature	
have not	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or rt appointed fiduciary by that fiduciary)
	Colin B. Shalin
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)