N0300010783

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Firefighters A	ssistance Fund, Inc.	
DOCUMENT NUM	IBER: N03000010783		
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
		ide Blosser	
	(Name of	Contact Person)	
	Firefighters A	ssistance Fund, Inc.	
	(Firm	n/ Company)	
	10050 B	Burnt Store Rd.	
.,	(,	Address)	
	Punta Go	orda, FL. 33950	
		te and Zip Code)	
		ocomcast.net d for future annual report notific	ation)
For further informati	on concerning this matter, pleas	e call:	
Joseph Amick		at (941) 662-000	02
	of Contact Person)	at (941) 662-000 (Area Code & Dayti	me Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departmen	at 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

Articles of Amendment to Articles of Incorporation of

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		TAY OF STATE		
(Name of Corporation as curren	sistance Fund, inc.	ARY OF STATE		
	00010783			
(Document Numb	per of Corporation (if known)			
ursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> ade following amendment(s) to its Articles of Incorporation:				
If amending name, enter the new name of t	the corporation:			
new name must be distinguishable and con reviation "Corp." or " Inc." "Company" or		acorporated" or the		
Enter new principal office address, if applic	cable:			
ncipal office address <u>MUST BE A STREET</u>				
				
Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>E BOX</u>)			
If amending the registered agent and/or reg	gistered office address in Florida, e	nter the name of the		
If amending the registered agent and/or reg new registered agent and/or the new registe		enter the name of the		
new registered agent and/or the new registe		enter the name of the		
		enter the name of the		
new registered agent and/or the new registe Name of New Registered Agent:		enter the name of the		
new registered agent and/or the new registe	ered office address:			
new registered agent and/or the new registe Name of New Registered Agent:	ered office address: (Florida street address)	 , Fłorida		
new registered agent and/or the new registe Name of New Registered Agent:	ered office address:			
new registered agent and/or the new registe Name of New Registered Agent:	(Florida street address) (City) Registered Agent:	, Florida (Zip Code)		

Page 1 of 3

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) Title <u>Name</u> Address Type of Action ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Paragraph one (1) of Article III (Purposes) is amended to read: The general nature and objects of this non-profit corporation shall be the organization of educational opportunities, training and promotion of general fire safety and welfare, and to contribute to the aide of burn victims and centers, for fire-fighters and EMT's, well as the general public; and to promote an encourage fire safety among the citizens of the United States of America.

The date of each amendment	(s) adoption: May 20, 2009
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/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or adopted by the board of dis	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	May 20,09 COBL-
Signature _	ar Bl-
(By hav	the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, our court appointed fiduciary by that fiduciary)
	Claude Blosser
	(Typed or printed name of person signing)
	President
	(Title of person signing)