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(Ac	ldress)	
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TO: Amendment Section **Division of Corporations**

PAR' NAME OF CORPORATION:	TNERSHIP FOR THE FIL	NANCIAL EDUCAT	TION INC	· · · · · · · · · · · · · · · · · · ·		
N0400000 DOCUMENT NUMBER:	02201	······································				_
The enclosed Articles of Amendment	and fee are submitted for t	iling.				
Please return all correspondence conce	erning this matter to the fo	lowing:				
PAM WHITTON						
	(Name of	Contact Person)				_
PARTNERSHIP FOR THE FINANC	IAL EDUCATION INC					
	(Firm	/ Company)		.		
P.O. BOX 32104						
	(/	Address)				_
PALM BEACH GARDENS, FL 3341	8					
	(City/ Stat	e and Zip Code)				_
jbhaymes@comcast.net					is in	
E-mail add	ress: (to be used for future	annual report notifica	ation)	71	Ī	
For further information concerning this	s matter, please call:			· _:	22	
SHERYL I PURCELL		561	622-2000		P# II	:
(Name of	Contact Person)	(Area Co	le) (Daytime Tele	phone Num	ber)₃	_
Enclosed is a check for the following a	amount made payable to th	e Florida Departmen	of State:			
	5 Filing Fee & \$\sum \$\\$43.75 \\ icate of Status Certifie (Addition enclose)	d Copy Conal copy is Cond (A	52.50 Filing Fee ertificate of Status ertified Copy additional Copy is nclosed)			
Mailing Address		Street Addre	ess			

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

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PARTNERSHIP FOR THE FINANCIAL EDUCATION INC

(Name of Corporation as c	urrently filed with the Florida Dept. of State)		
N04000002201			
(Document	Number of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For Profit Corporation</i> ado	pts the fo	ollowing
A. If amending name, enter the new name of the cor	poration:		
			The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u> E			<i>III</i> C.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		:"w	*****
			<u></u>
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		.1	JUN 22
	mee address.	• • •	
Name of New Registered Agent:			<u> </u>
	(Florida street address)	 	٠ <u>٠</u>
New Registered Office Address:	, , , , , , , , , , , , , , , , , , , ,	,	
	, Florida		·
	(City) (Zip Co	ode)	
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I		sition.	
	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 <math>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 J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PRES.	MARK T HOLBERT	127 WENTWORTH CT
Add			JUPITER, FL 33458
X Remove			
2) Change	VP	JACKIE FARBER	217 THORTON DRIVE
Add			PALM BEACH GARDENS,
X Remove			FL 33418
3) Change	PRES.	NANCY T BOURG	15655 80TH DRIVE NORTH
X Add			PALM BEACH GARDENS,
Remove			FL 33418
4) Change			
Add			
Remove			
5) Change			
Add		•	
Remove			
6) Change			
Add			
Remove			

famending or adding additional Art attach additional sheets, if necessary).	(Be specific)
•	•
	· · · · · · · · · · · · · · · · · · ·
	

The	, if other than the	
date	e this document was signed.	
Eff	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	listed as the
Add	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	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 6/18/15	
	Signature (By the chairman or vice 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)	
	SHERYL I PURCELL	
	(Typed or printed name of person signing)	
	7-4 7-4	- <u></u>
	TREASURER	<u></u>
		E
	(Title of person signing)	2 1
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