## N0400002201

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AUG 1 8 2015

C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

PARTNERSHIP FO	OR THE FINANCIAL ED	UCATION	INC	
N04000002201 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
PAM WHITTON				
	(Name of Contact Perso	n)		<del></del>
PARTNERSHIP FOR THE FINANCIAL EDUCAT	TION INC			
	(Firm/ Company)		· · · · · · · · · · · · · · · · · · ·	.,
P.O. BOX 32104				
	(Address)			<u> </u>
PALM BEACH GARDENS, FL 33418				
	(City/ State and Zip Cod	e)	· · · · · · ·	
jbhaymes@comcast.net	•			
E-mail address: (to be use	ed for future annual report	notification	1)	
For further information concerning this matter, please	e call:			
SHERYL I PURCELL		51		
(Name of Contact Person	n) (A	rea Code)	(Daytime Telephone Nu	mber)
Enclosed is a check for the following amount made p	payable to the Florida Dep	artment of	State:	
\$35 Filing Fee \$\sum \$		Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is used)	
Mailing Address Amendment Section		Address	On	

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

FILED

## Articles of Amendment to Articles of Incorporation of

2015 AUG 17 PM 4: 04

SFORE ARY OF STATE

## PARTNERSHIP FOR THE FINANCIAL EDUCATION INC

(Name of Corporation as currently filed with the Florida Dept. of State) N04000002201 (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: FOUNDATION FOR DWYER ACADEMY OF FINANCE INC. 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. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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>V</u> <u>Mik</u>	n Doe se Jones y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add	<del></del>		
Remove 6) Change Add Remove	<del></del>		

If amending or adding additional Articattach additional sheets, if necessary).	(be specific)	
	<del></del>	
· · · · · · · · · · · · · · · · · · ·		

	e date of each amendment(s) adoption:e this document was signed.	, if other than the
Effe	fective date if applicable:	
	(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 no cument's effective date on the Department of State's records.	t be listed as the
Ada	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 8/14/15	·
	(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)	
	TREASURER	
	(Title of person signing)	