NO40000 5445

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August 28, 2019

VICKIE ZUCKERMAN 10881 SAN JOSE BLVD JACKSONVILLE, FL 32223

SUBJECT: FIRST COAST CANCER FOUNDATION, INC.

Ref. Number: N04000005445

We have received your document for FIRST COAST CANCER 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):

Please choose a title for Jamie Vitale.

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) 245-6050.

Catherine M Wood Regulatory Specialist II

2019 SEP -9 PH 2

Done 9/5

Letter Number: 019A00017783

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FIRST COAST CANCEP FOUNDATION				
DOCUMENT NUMBER: NO4000) N 5 44 5			
DOCUMENT NUMBER:	0-110			
The enclosed Articles of Amendment and fee are subm	itted for filing.			
Please return all correspondence concerning this matter	to the following:			
VICKIE ZUCKEPMAN				
	Name of Contact Person)			
FIRST COAST CANCER	FOUNDATION			
	(Firm/ Company)			
10881 SAN JOSE BLV	D,			
	(Address)			
JACKSONVILLE, FL	32223			
•	City/ State and Zip Code)			
VICKIE ACKERMANICANO E-mail address: (to be used	CER.COM			
Fmail address: (to be used	for future annual report notification)			
For further information concerning this matter, please of	all:			
VICKIE ZUCKERMAN	a 904.880.5522			
(Name of Contact Person)	at 904 · 880 · 5522 (Area Code) (Daytime Telephone Number)			
	11 - 1 - 11 - 11 - 12 - 13 - 13 - 13 - 1			
Enclosed is a check for the following amount made pay				
□ \$35 Filing Fee □\$43,75 Filing Fee & 【	□\$43.75 Filing Fee & □\$52.50 Filing Fee			
Certificate of Status	Certified Copy Certificate of Status			
	(Additional copy is Certified Copy			
	enclosed) (Additional Copy is			
	Enclosed)			
Mailing Address	Street Address			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FIRST COAST CA	NCEP P	CUNDATION	
(Name of Corporation as curre	ntly filed with the	Florida Dept. of State)	
NO40000054	45		
	ber of Corporation	(if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida No</i>	<i>t For Profit Corporation</i> adop	ts the following
A. If amending name, enter the new name of the corpora	tion:		
			The new
name must be distinguishable and contain the word "corpore" (Company" or "Co," may not be used in the name. B. Enter new principal office address, if applicable:	ation" or "incorpoi	rated" or the abbreviation "Co	orp." or "Inc."
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		- SO 22
		<u> </u>	200 3
		-111.	SE .
			-9 -9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			(S)
(Maining data as Santa De Maior Of Live Don)		;	
			
		,	47
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		ida, enter the name of the	
new registered agent and/or the new registered wines	a ca		
Name of New Registered Agent:			
New Registered Office Address:		(Florida street address)	
		, Florida	
	(City)	(Zip Cod	e)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f		cept the obligations of the posi	tion.
•			
	Signature of New R	egistered 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>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) change	T	MAGGIORE, JENN	IFER 10881 SAN JOSE BL
Add Kemove			JACKSONVILLE, FL 3222
2) Change	<u> </u>	VITALE, JAMIE	10001 SAN JOSE BLVD
Add Promount			JACKSONVILLE, FL 32
Remove 3) Change			
Add			
Remove			
4) Change Add			
Remove			
5) Change		<u> </u>	
Add Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti	icles, enter change(s	<u>) here</u> :			
(attach additional sheets, if necessary).	(Be specific)				
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	e date of each amendment(s) adoption: e this document was signed.	8.1.2019	, if other than the
	ective date if applicable:	8.14.2019	
	(no	more than 90 days after amendment file date)	
	ee: If the date inserted in this block does no ument's effective date on the Department or	t meet the applicable statutory filing requirements. f State's records.	this date will not be listed as the
۸de	option of Amendment(s) (CI	HECK ONE)	
	The amendment(s) was/were adopted by the was/were sufficient for approval.	he members and the number of votes cast for the ar	mendment(s)
₽ ⁄	There are no members or members entitled adopted by the board of directors.	d to vote on the amendment(s). The amendment(s)) was/were
	Dated 8.14.2	2019	
	Signature	1	
	have not been selected	chairman of the board, president or other officer, by an incorporator – if in the hands of a receiver, iduciary by that fiduciary)	
	SCOTI	N. ACKERMAN	
		(Typed or printed name of person signing)	
	PRESID	ENT	
		(Title of person signing)	Z