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R. WHILE

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

SUNRISE SPONAME OF CORPORATION:	RTS FOUNDATION,	INC.		
N0400007794 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are				
Please return all correspondence concerning this	matter to the following	:		
Margo Lindsay				
	(Name of Contac	t Person)		
	(Firm/ Comp	anv)		
2391 Sumatran Way #5	(Tana Comp	, any 7		
	(Address)		
Clearwater, FL 33763				
	(City/ State and Z	(ip Code)		
blackbart500@aol.com				
E-mail address: (to be	used for future annual	report notifi	cation)	
For further information concerning this matter, p	lease call:			
Margo Lindsay		727 at	669-0899	
(Name of Contact Po	erson)	(Area C	ode) (Daytime Te	elephone Number)
Enclosed is a check for the following amount ma	de payable to the Flori	da Departme	nt of State:	
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	ee & \$\subseteq\$\$43.75 Filing I atus Certified Copy (Additional copenclosed)	py is	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Add Amendment Division of Clifton Buil	Section Corporations	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

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SUNRISE SPORTS FOUNDATION, INC.

		SECRETATION
(Name of Corporation as curren	tly filed with the Flo	SECRETARY OF STATE orida Dept. of State() HASSEE FLORIDA
N0400007794		201107
(Document Numb	er of Corporation (if	known)
Pursuant to the provisions of section 617.1006. Florida Statuto amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not F</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
SUNCOAST VISIONS FOUNDATION, INC.		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporat	
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 a new registered agent and/or the new registered office a		a, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(1	Florida street address)
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fair	Agent: miliar with and accep	ot the obligations of the position.
	ignature of New Peci	Starod Accost if charaing

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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
Remove 2)Change			
Add			
3) Change Add			
Remove 4) Change			
Add			
5) Change Add			
Remove 6) Change	****		
Add		•	

JL .	The name of the Corporation shall be: SUNCOAST VISIONS FOUNDATION, INC
	The many of the corporation shall be be received a received to constitution, and
14	an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself:
11. n	TOTAL TOTAL THE CONTROL OF THE CONTR
<u>p</u>	(if not applicable, indicate N/A)
D TT	(if not applicable, indicate N/A)
<u>p</u>	(if not applicable, indicate N/A)
	(if not applicable, indicate N/A)
<u>p</u>	(if not applicable, indicate N/A)
	(if not applicable, indicate N/A)
	(if not applicable, indicate N/A)
— — —	(if not applicable, indicate N/A)

Fhe date of each amendment(s) adoption:late this document was signed.			
, -			
Effective date <u>if applicable</u> : (no more than 90 days after	amandmout file data)		
(no more than 90 days tyter	amenameni jae aalej		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records.			
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the members and the numwas/were sufficient for approval.	ber of votes cast for the amendment(s)		
There are no members or members entitled to vote on the amendm adopted by the board of directors.	ent(s). The amendment(s) was/were		
Dated Feb 7, 2016	-		
Signature Marga Lindsay			
(By the chairman or yee chairman of the board- have not been selected, by an incorporator — if other court appointed fiduciary by that fiduciar	in the hands of a receiver, trustee, or		
MARGO	LINDSAY		
(Typed or printed no	ame of person signing)		
DIRECTOR. TRE	ASURER & RESESTERED AG		
WILL CITY I THE	77307101		