

NO4000010041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100043205931

12/09/04--01021--012 \*\*52.50

FILED  
04 DEC -9 AM 11:50  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Rs 14/13 for  
Amend

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Cure 4 Diabetes Foundation, Inc.

**DOCUMENT NUMBER:** N04000010041

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frank Menke III

(Name of Contact Person)

Cure 4 Diabetes Foundation, Inc.

(Firm/ Company)

2524 S. Osprey Ave.

(Address)

Sarasota, FL 34239

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Eileen Burnjas

(Name of Contact Person)

at ( 941 )

364-9285

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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 Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Articles of Amendment  
to  
Articles of Incorporation  
of

**FILED**

04 DEC -9 AM 11:50

Cure 4 Diabetes Foundation, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

SECRETARY OF STATE  
TALLAHASSEE  
FLORIDA

N04000010041

(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:

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Article V - Initial Directors and/or Officers: Amend to read as follows:

President: Frank Menke III      Secretary & Treasurer: Linda Menke      (Delete Craig Menke)

Add Article VIII - Dissolution Provision - as follows:

Upon dissolution of the organization, all remaining assets must be used exclusively for exempt purposes  
by the Edmonton Protocol Medical Research Project.

(Attach additional pages if necessary)

(continued)


The date of adoption of the amendment(s) was: 12-7-04

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 7th day of December, 2004

Signature   
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Frank Menke III

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**