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SECRETARY OF STATE
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Rossway Mod	ore & Taylor Foundation	on, Inc.
DOCUMENT NUM	IBER: N05000000621		4.00
The enclosed Article	s of Amendment and fee are sul	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
		. Tierney, Esquire	
	(Name of	Contact Person)	
	Rossway Moor	e Taylor & Swan, PLC	
	(Firm	n/ Company)	
	2101 Indian Rive	er Boulevard, Suite 200	
<del></del>	(4	Address)	<del></del>
	Vero Beac	h, Florida 32960	
	- · · · · · · · · · · · · · · · · · · ·	te and Zip Code)	
		bbeachlawyers.com d for future annual report noti	fication)
For further information	on concerning this matter, pleas	e call:	
Thomas	W. Tierney, Esquire	<sub>at (</sub> 772 <sub>)</sub> 231-4	440
(Name	of Contact Person)	(Area Code & Day	ytime Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florida Departm	ent of State:
\$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)
Amer Divis P.O.	ing Address Indment Section Indicate the Address Indicate the Indicate th	Street Address Amendment Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	ations nter Circle

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren		<del></del>	<b>–</b>	
	0000621	Dept. of State		
	er of Corporation (if know	/n)	_	
Pursuant to the provisions of section 617.1006, F the following amendment(s) to its Articles of Income.		la Not For Profit Co	<i>rporation</i> adop	ts
A. If amending name, enter the new name of t	he corporation:			
Rossway Moore Tay	lor & Swan Foundatio	n, Inc.		
The new name must be distinguishable and con abbreviation "Corp." or "Inc." "Company" or			ed" or the	
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET	cable:		SECRE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)		P-2 PH 3: 33 IARY DF STATE HASSEE, FLORIDA	FILED
D. If amending the registered agent and/or re- new registered agent and/or the new registered Agent:		Florida, enter the I	name of the	
New Registered Office Address:	(Florida street ac	ldress)		
_	(0:4-)	, Flori		
	(City)	(21)	ip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered apposition.		th and accept the o	bligations of t	he
Sig	nature of New Registered	Agent, if changing	<del></del>	

## 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)

**Title** <u>Name</u> Address Type of Action Michael J. Swan VD 2101 Indian River Blvd., Ste 200 Add Vero Beach, FL 32960 ☐ Remove \_ Remove ☐ Add \_\_\_\_ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) ad	loption: $() \sim 31 \gamma 2 \circ 13$
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)
There are no members or membadopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated August 3	Thomas W. Leiney
have not	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, our appointed fiduciary by that fiduciary)
	Thomas W. Tierney, Esquire
	(Typed or printed name of person signing)
-	President
	(Title of person signing)