

NO5000001297

(Requestor's Name)

(Address)

(Address)

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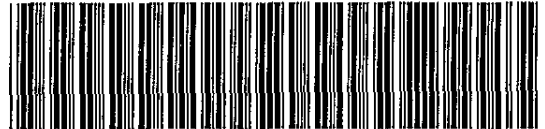
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** ALL CHILDREN'S CANCER RECYCLING PROGRAM, INC

**DOCUMENT NUMBER:** N0500 000 1297

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

Please return all correspondence concerning this matter to the following:

FRANCIS IJEWERE  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/ Company)

819 SCENIC HEIGHTS DRIVE  
(Address)

BRANDON, FLORIDA 33571  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

FRANCIS IJEWERE at (813) 300 7626  
(Name of Contact Person) (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

ALL CHILDREN'S CANCER RECYCLING PROGRAM, INC.  
(Name of corporation as currently filed with the Florida Dept. of State)

NO5000001297

(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):**

CHILDREN'S CANCER RECYCLING PROGRAM, INC

(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)**

PLEASE DELETE DODE ACKEY, VICE PRESIDENT

(Attach additional pages if necessary)

(continued)

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FLORIDA

The date of adoption of the amendment(s) was: MARCH, 30, 2005

Effective date if applicable: MARCH 30, 2005  
(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 30 day of MARCH, 2005.

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.)

FRANCIS I JEWERE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**FILING FEE: \$35**