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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

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mail Address: donna narris ctulbrigh

DEC 14 AM 8: 00 PRETARY OF STATE

COR AMND/RESTATE/CORRECT OR O/D RESIGN JUSTIN M. DART FOUNDATION, INC.

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12/14/2009 109

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Justin M. Dart	Foundation	<u>n, lr</u>	nc.	··
DOCUMENT NUM	BER: N05000002070				
The enclosed Articles	of Amendment and fee are sub	mitted for filin	g.		
Please return all corre	spondence concerning this mat	ter to the follow	/ing:		
		Adams Harri	_		
	(148me of	Contact Person	.)		
_	Fulbright	& Jaworski, L	_LP		
•	(Firm	/ Company)			
	1301 McK	inney, Ste 51	100		
-		Address)			
	Hausto	n,TX 77010	1		
		te and Zip Code			······································
	!	O anno all a con			
	E-mail address: (to be use	@gmail.com d for future ann		eport notification	on)
For further informatio	n concerning this matter, please	e call:			
Donna Adams Ha	rris	_{set} 713	3	v 651-3565	
	of Contact Person)	(Ar	ea Co	de & Daytime	Telephone Number)
Enclosed is a check fo	or the following amount made p	ayable to the FI	lorida	Department of	F State:
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 F Certified C (Additional enclosed)	opy l copy	y is	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. F	ng Address dment Section on of Corporations dox 6327 lassee, FL 32314	Am Div Cli: 266	tendri ision fton E	ddress tent Section of Corporations duilding ecutive Center C see, FL 32301	ircle

Articles of Amendment to Articles of Incorporation of

PILED
ZOOG DEC 14 AM 9: 49 FALLAHASSEE FISTATI

Justin M. Da	rt Foundati	on, Inc.	ORIO
(Name of Corporation as corre	ntly filed with	the Florida Dept. of Stat	e)
N050			
(Document Num	ber of Corporat	ion (if known)	
Pursuant to the provisions of section 617.1006, I the following amendment(s) to its Articles of Inc.		, this <i>Florida Not For Pro</i>	ofit Corporation adopt
A. If amending name, enter the new name of	the corporatio	n:	
We Learn F	ree Foundati	on, Inc.	
The new name must be distinguishable and co abbreviation "Corp." or "Inc." "Company" or			porated" or the
B. Enter new principal office address, if appl	icable:	606 Broadway Ave	
(Principal office address MUST BE A STREE		Apt #506	
		Santa Monica, CA 9	0401
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		606 Broadway Ave	
		Apt #506	
		Santa Monica, CA 9	0401
D. If amending the registered agent and/or re new registered agent and/or the new regis			r the name of the
Name of New Registered Agent: C		rporation System	
	1200 Sou	th Pine Island Road	
New Registered Office Address:	(Florida street address)		•
	_ F	Plantation	, Florida 33324
•		(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered	ng Registered A	gent: familiar with and accept	the obligations of th
position.	/// _	//	a Mahla ala

Page 1 of 3

(Attach aa	and title, name, and address of eac ditional sheets, if necessary)	n Otticer and/or Director Dem	<u>e audeu:</u>
<u>Title</u>	Name	Address	Type of Actio.
<u>_</u>			
			☐ Add
-			

The date of each amendmen	nt(s) adoption: December 2, 2009
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes east for the amendment(s) proval.
There are no members or adopted by the board of c	r members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.
Dated/	0x Dx
(E he	By the chairman or vice chairman of the board, president or other officer-if directors are not been selected, by an incorporator — if in the hands of a receiver, trustee, or ther court appointed fiduciary by that fiduciary)
	Justin M. Dart
	(Typed or printed name of person signing)
	President
	(Title of person signing)