10/12/2016 13:45

## Florida Department of State

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	<b>Fax Number</b>	: (850)617-6380	12
From:			PX
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	ŧ.
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN S.E.E. FOUNDATION, INC

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OCT 13 2016 C MCNAIR OCT 13 2016 C MCHAIR 12/Oct/2016 10:37:15 AM

2/2016 13:45	3052201440	LAZARUS	PAGE	02/0
Oct/2016 10:37:15 AM	I	Elliott Business Services 3056814451	H16000252	& O :
		Articles of Amendment	160	ACCES.
		Articles of Incorporation	3	92
		of	12	92
SE E FOUNDATION	INC		P	ON H. HO
_	(Name of Corpo	ration as currently filed with the Florida Dept.	of Sinte)	يخ بے
N05000006930				
		(Document Number of Corporation (If known)		0
Pursuant to the provision	na of section 617.100	06, Florida Statutes, this <i>Florida Not Por Profit C</i>	Corporation adopts the following	
amendment(s) to its Arti	cles of incorporation	E.		
A. If amending name.	enter the new name	of the corneration:		
			The new	
name must be distinguis	hable and contain th	te word "corporation" or "incorporated" ar the c		
<u> "Сотрану" оу "Со." н</u>	way not be used in th	A.Hamil	·	
B. <u>Enter new princips</u>	d office address, if a	inplicable:		
(Principal office addres				
C. Enter new mailing				
(भरतासम्बद्ध वसवस्थान भर	AY BE A POST OF	MCE BOX)		
		er registered office address in Florida, enter the	name of the	
new registered ager	<u>at and/or the new r</u>	existered office address:		
<u>Name</u>	of New Registered A	28nt:		
		(Flortda stree)	pridram)	
New.	Registered Office Ac	ideas:		
			, Plorida	
		(City)	(Zio Code)	
			,	
New Registered Agent	Signature, if than	i <mark>sing Registered Agent:</mark> d agent, I am familiar with and accept the obliga	ations of the position	
i veresy accept me app	HICHEIN IT LESIZIELE	n agent, 1 cm jamuar wun ana accept the cough	wing of the brattion	
		Plantage and the Part of the State of the		
•		Signature of New Registered Ages	u, y changing	

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LAZARUS Elliott Business Services 3056814451 PAGE 03/05

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:

(Astach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office thle:

P = President; Y= 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 latter 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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, Y as Remove, and Sally Smith, SY as an Add.

Example: X_Change X_Remove X_Add	<u> Y</u> <u>M</u> i	hn Doe ike Jones ily Smith	
Type of Action (Check One)	Title	Name	Address
1)Change	VP	TALIBAH MAWIYAH	3950 NW 185 STREET
Add			MIAMI GARDENS FL 33055
X Remove			
2) Change	DIR	MARCUS FOWLER	528 NW 8 STREET APT 208
XAdd			MIAMT PL 33136
Remove			
3) Change			
Add			
Remove			
4) Chengo			
Add			
Remove			
S) Change			
Add			
Велюче			
6)Change			
Add			
Remove			

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## LAZARUS Elliott Business Services 3056814451

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E. It amending or adding additional Articles, enter thange(s) here: (attach additional thesis, if necessary). (Be specific)	H16000252603

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/12/2016 13:45	3052201440		LAZARUS			PAGE	05/05
12/Oct/2016 10:37:15 AM		Eillott Business Services 3056814451			600	02528	03
The date of each amends date this document was significant.		October.	12, 20	1/4		, if other than the	,
Effective date if applical	Ne:	more than 90 days after	omendment file da	ne)	<del></del>		<del>-</del>
Note: If the date inserted document's effective date	in this block does no on the Department (	ot meet the applicable st of State's records.	_	,	te will not b	isted as the	
Adoption of Amendmen	(O) (C	HECK ONE)					
The amendment(s) was/were sufficient if		the members and the nu	nber of votes cast f	or the amendin	em(s)		
There are no membe adopted by the board		ed to vote on the amendr	nent(s). The amend	lmont(s) was/w	·ere		
Dating	October	12, 2016.	0	$\Omega$			
Signature _		The 4	Prosea	rd		_	
E) d	ave not been selected	ce chairman of the hopro d, by an incorporator – it fiduciary by that fiducia	fin the hands of a re				
	KATENA BROUS	SSARD					
		(Typed or printed a	ame of person sign	ing)			
	PRESIDENT						
		(Title o	f person signing)				

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