# N06000007218

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

PLORIDA CHARTER FOUNDATION, INC.  NAME OF CORPORATION:	
N06000007218 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Scott Sznitken, Executive Director	
(Name of Contact Person)	
Florida Charter Foundation, Inc.	
(Firm/ Company)	
1225 SE 2nd Avenue	
(Address)	
Fort Lauderdale, FL 33316	
(City/ State and Zip Code)	
sznitken.scott@franklin-academy.org	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Scott Sznitken, Executive Director (954) 745-7601	
(Name of Contact Person) (Area Code) (Daytime Tel	ephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee S43.75 Filing F	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address** 

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation

#### FLORIDA CHARTER FOUNDATION, INC.

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

N06000007218

(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:

FRANKLIN ACADEMY FOUNDATION, INC.		The new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		a, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		Florida street address)
	(City)	Florida
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		ot the obligations of the position
<del></del>	Signature of New Poor	stered Agent if changing

## 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)

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

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

Example:  X Change X Remove X Add	$\underline{V}$ Mik	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	Scott Sznitken	1225 SE 2nd Avenue
X Add			Fort Lauderdale, FL 33316
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding (attach additional sheets,	if necessary).	(Be specific)			
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The date of each amendment(s) adoption:	, if other than the
ate this document was signed.	
July 1, 2019  Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ocument's effective date on the Department of State's records.	t be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Signature  (By the chairman of vice chairman of the board, president or other officer-if directors	
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Dr. David L. Thomas	
(Typed or printed name of person signing)	
Board Chairman	
(Title of person signing)	