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S. HAWKES

MAR 19 2013

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Sara & La	rry Greenspon Foundation, Inc.
DOCUMENT NUMBER: NO600007	821
The enclosed Articles of Amendment and fee are sub-	nitted for tiling.
Please return all correspondence concerning this matte	er to the following:
Austin Hirsch	
	(Name of Contact Person)
Reed Smith LLP	
	(Firm/ Company)
10 S. Wacker Dr., #4000	
	(Address)
Chicago, IL 60606	
	(City/ State and Zip Code)
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Austin Hirsch	312207-6467
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
S35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 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, Ft. 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301

Articles of Amendment Articles of Incorporation

Sara & Larry Greenspon Foundation, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) N06000007821

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the corpora	<u>tion:</u>			
Larry Greenspon Foundation, Inc.				The ne
name must be distinguishable and contain the word "corpord" ("Company" or "Co." may not be used in the name.	ation" or "incorporated	" or the abbreviation	"Corp."	" or "Inc.
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			_ယ က:
				一瑟。
			(4)	*
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			ر نور مورستان	حندا المحد _:·
			ر . بران از المنظ	唐 7:42
				?>
D. If am <u>ending</u> the reg <u>ist</u> ered agent and/or registered of <u>f</u>	ian address in Florida	onton the nume of th	0	
new registered agent and/or the new registered office		enter the name of th	Ē	
	 -			
Name of New Registered Agent:				
New Registered Office Address:	(Florida street address)			
(City		, Florida (Zip Code)		
(Cup	,	(z.ip Chae)		
New Registered Agent's Signature, if changing Registered				
I hereby accept the appointment as registered agent. I am f		he obligations of the	position	1.
	stered Agent, if changing			

Page 1 of 4

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 Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn <u>Doe</u> ke Jones l <u>ly Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Sara Lyter	372 John Weaver Road
Add			Columbus, NC 28722
X Remove			
2) Change	<u>D</u>	Austin Hirsch	c/o Reed Smith LLP
X Add			10 S. Wacker Dr., #4000
Remove			Chicago, IL 60606
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E.	If amending or adding additional Art	icles, enter chan	ge(s) here:				
	If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)					
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The date of each amendment(s) adoption: January 1, 2013				
Effe	Effective date if applicable:			
	(no more than 90 days after amendment file date)			
Ado	option of Amendment(s) (CHECK ONE)			
	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.			
	Dated January 1, 2013 Signature (By the chairman or vice chairman of the board, president or other officer-if directors			
	have not been delected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)			
	Larry Greenspon			
	(Typed or printed name of person signing)			
	Director, President			
	(Title of person signing)			

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