N06000009620

| (Re | equestor's Name) | |
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| (Ad | Idress) | |
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| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nar | ne) |
| (Do | ocument Number) | |
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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | on of Palm Beach County | | | <u></u> |
|---|---|------------------|--|-----------|
| N06000009620 DOCUMENT NUMBER: | | | | 17 MAR 20 |
| The enclosed Articles of Amendment and fee are su | bmitted for filing. | | | 3 |
| Please return all correspondence concerning this ma | tter to the following: | | | |
| Judith Selzer | | | | |
| | (Name of Contact Perso | n) | | |
| Women's Foundation | | | | |
| | (Firm/ Company) | | <u> </u> | |
| 800 NW 22nd Court | | | | |
| | (Address) | | | |
| Delray Beach, FL 33445 | | | | |
| | (City/ State and Zip Coo | le) | | |
| judith@womensfoundationpbc.org | | | | |
| E-mail address: (to be use | ed for future annual report | notification | 1) | |
| For further information concerning this matter, pleas | se call: | | | |
| Judith Selzer | 56 at | 51 | 909-8415 | |
| (Name of Contact Perso | on) (A | rea Code) | (Daytime Telephone | Number) |
| Enclosed is a check for the following amount made | payable to the Florida Dep | artment of | State: | |
| \$35 Filing Fee & Sertificate of Status | \$\textsquare\squ | Certif Certif | 0 Filing Fee icate of Status ied Copy tional Copy is osed) | |
| Mailing Address Amendment Section | | Address | on | |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| Women's Foundation of Palm Beach County, INC. | | _ | 生 空 |
|---|-----------------------------|---------------------------------|-------------------|
| (Name of Corporation as curr | ently filed with the Floric | la Dept, of State) | 70 |
| N06000009620 | | | 0 |
| (Document Nur | nber of Corporation (if kno | own) | AN 20 A Gallowing |
| Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation: | utes, this Florida Not For | Profit Corporation adopts the | following |
| A. If amending name, enter the new name of the corpor | ation: | | |
| Women's Foundation of Florida, Inc. | | | The new |
| name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name. | ration" or "incorporated" | or the abbreviation "Corp." | |
| B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRES) | <u>s</u>) | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 800 NW 22nd Court | | |
| | Delray Beach, FL 3344 | +3 | |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered office | | nter the name of the | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | (Flor | ida street address) | |
| | | , Florida | |
| | (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am | | ne obligations of the position. | |
| | Signature of New Register | red 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 | PT John E V Mike J SV Sally S | lones | |
|----------------------------------|-------------------------------------|-------------|-----------------|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add Remove | | | |
| 2) Change Add | | | |
| Remove 3) Change Add | | | |
| Remove 4) Change Add Remove | | | |
| 5) Change Add | | | |
| Remove 6) Change Add Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) | | | | | |
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| The date of each amendment(s) ad | loption: | , if other than the |
|---|---|-----------------------------|
| late this document was signed. | | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this blo document's effective date on the Dep | ck does not meet the applicable statutory filing requirements, this date partment of State's records. | e will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adwas/were sufficient for approva | dopted by the members and the number of votes cast for the amendme al. | nt(s) |
| There are no members or membadopted by the board of directors | pers entitled to vote on the amendment(s). The amendment(s) was/webrs. | ге |
| Dated March 14, 2 | 2017 | |
| Signature | Judith Selser | |
| (By the chair have not bee | man or vice chairman of the board, president or other officer-if direct selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary) | |
| Judith Se | elzer | |
| | (Typed or printed name of person signing) | |
| President | ı. | |
| | (Title of person signing) | _ |