· N06000000292

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Norris D. Lang	gston Yo	outh Schol	arship Fo	undation
DOCUMENT NUMI	BER: N06000010292				
The enclosed Articles	of Amendment and fee are sub	omitted for	filing.		
Please return all corre	spondence concerning this mat	ter to the fo	ollowing:		
		dre Browr			
	(Name of	Contact Pe	erson)		
	Norris D. Langston You			lation, Inc	
	(Firm	1/ Company	')		
	107 LIBERTY STREET				
	(,	Address)			
	PORT ST			. <u>.</u> ,	
	(City/ Sta	te and Zip	Code)		
- 4	ndlyf(E-mail address: (to be use	@gtcom.r		notification)	
For further information	n concerning this matter, pleas	e call:			
Andre Brown		at (850) 4	45-4241	
(Name	of Contact Person)		(Area Code &	& Daytime Te	elephone Number)
Enclosed is a check for	or the following amount made p	payable to t	he Florida Dej	partment of S	tate:
☑\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certifi	.75 Filing Fee ed Copy ional copy is sed)	((\$52.50 Filing Fee Certificate of Status Certified Copy Additional Copy is enclosed)
Mailing Address			Street Addre		,
	dment Section on of Corporations		Amendment ! Division of C		
Division of Corporations P.O. Box 6327			Clifton Build		
Tallahassee, FL 32314				ve Center Circ	le

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Norris D. Langston Youth Scholarship Foundation Inc

	ar ocholarsh	ip i oundation in		
(Name of Corporation as curre	ently filed with t	he Florida Dept. of Sta	<u>ite</u>)	
N06	000010292			
(Document Num	nber of Corporation	on (if known)		
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		this <i>Florida Not For P</i>	rofit Corporation	adopts
A. If amending name, enter the new name of	f the corporation	<u>ı:</u>		•
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" o			orporated" or the	- е
B. Enter new principal office address, if app	licable:			_
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		A.C.	=	
			CR	¥
			A	
C. Butana and Marcal Ma			\$\$\$\$	+ [-
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI)	<u>:</u> CE ROX)		e e	3
(<u>C2 20.1.</u> /		70	-= c
			<u> </u>	-22
			J.14	
D. If amending the registered agent and/or new registered agent and/or the new registered agent:	stered office add		ter the name of t	<u>he</u>
	2636 W	Mission Rd #61		
		da street address)	_	
	Та	llahassee	Florida 32304	4
	· · · · -	(City)	_, Florida 32304 (Zip Code)	-
New Registered Agent's Signature, if changing I hereby accept the appointment as registered position.	d agent. I am j			s of the

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>D</u>	Tim Wilder	2012 Juniper Ave. Port St. Joe, Fl 32456	☑ Add □ Remove
D	Ralph Rish	103 COLONIAL LANE Port St. Joe, Fl 32456	☐ Add ☑ Remove
			☐ Add ☐ Remove
E. If amen (attach d	ading or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: c specific)	
		-	
		<u> </u>	

C - 🔏	4-29-10
The date of each amendme	nt(s) adoption:
Effective date if applicable	(date of adoption is required)
in 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	were adopted by the members and the number of votes cast for the amendment(s) oproval.
There are no members of adopted by the board of o	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.
Dated Ap	ril 29,2010
(E ha	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, other court appointed fiduciary by that fiduciary)
	Andre Brown
	(Typed or printed name of person signing)
	Chairman
	(Title of person signing)

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