

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN THE LURIA FAMILY FOUNDATION, INC.

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Corporate Filing Menu

Help C. GOLDEN AUG 2 9 2019

## COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION:	ndation, Inc.		
DOCUMENT NUMBER: N06819			
The enclosed Articles of Amendment and fee are submi	ated for filing.		
Please return all correspondence concerning this matter	to the following:		
Laurence 1 Blair			
0	Name of Contact	Person)	
Greenspoon Marder LEP			
	(Firm/ Compa	ny)	
2255 Glades Road, Suite 400E			
	(Address)		<del></del>
Bora Raton, FL 33434			
((	City/ State and Zig	p Code)	
łamy.hlair@ginlaw.cixn			
E-mail address; (to be used) (	or future annual r	eport notification	)
For further information concerning this matter, please or	n11:		
Laurence 1. Biair	1	561 at	994-2212
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pays	able to the Florida	a Department of S	tatet
S\$35 Filing Foc	1\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Canife y is Canife	Filing Fee rate of Status ad Copy conal Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	7 1 0 2	Street Address Amendment Scotic Division of Corpo Clefton Building 2561 Executive Co Tallahassee, FL 32	rations enter Circle

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## Articles of Amendment Articles of Incorporation of

(Name of Corporation as curre	ntiv tiled with the Plorit	ia Dept. of State)
N06819		
(Document Num	ber of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida Statu imendment(s) to its Articles of Incorporation:	tes, this Florida Not For	Profit Corporation adepts the following
A. If amending name, enter the new name of the corpora	ttion;	
N/A	•	The new
name must be distinguishable and contain the word "corpor	ation" or "incorporated"	
"Company" or "Co," may not be used in the name		
3. Enter new principal office address, if applicable:	N/A	
Principal office address MUST RE A STREET ADDRESS	<u> </u>	
		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B()X)	N/A	
D. If amending the registered agent and/or registered off	fice address in Florida, o	enter the name of the
new registered agent and/or the new registered office		
Name of New Registered Agent: N/A	<del></del>	
	(Fla	rida sireet oddress)
New Registered Office Address:		
N/A		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere	d Auent	
hereby accept the appointment as registered agent. I am f	familiar with and accept t	he abligations of the position.

~ .	بالمحسر
77.3	, ,
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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and firle, 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 = Chairmon 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 us a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example: X_Change X_Remove X_Add	V Mik	n Doc se Jones sy Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) X Change	90	Peter Luria	1800 West 23 Street
^dd			Miami Beach, FL 33140
Remove			<u></u>
2) X Change	DSTV	Nancy Luriz Cohen	2669 South Bayshore Drive
Add			Apt. 301N
Remove			Coconut Grove, FL 33133
Change	D	Laurence I. Blair	2255 Glades Road, Suite 400E
x Add			Boca Raton, FL 33434
Remove			
4) Change	DP	Gloria Luria	2659 South Bayshore Drive
Add			Apl 301N
X Remove			Coconut Grove, FL 33123
5) Change			
Add			
Remove			<del></del>
δ) Change			
Add			
Remove			

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E. If amending or adding	additional Articles.	enter change(s) l	here:		
(attach additional sheet)	s, if necessary). (Be	specific)			
N/A					
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the date of each amendment(s) adoptionate this document was signed.	on:	<del></del>	, if other than the
ffective date if applicable:	(no more than 90 days after a	inendment file date)	
iote: If the date inserted in this block de ocument's effective date on the Departu	oes not meet the applicable state		will not be listed as the
doption of Amendment(s)	( <u>CHĘÇK ONE</u> )		
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the numb	or of votes cast for the amendment	(s)
There are no members or members of adopted by the board of directors.	entitled to vote on the amending	nt(s). The amendment(s) was/were	:
Dated 7/21	19 200 A-		
(By the chairman have not been se		president or other officer-!f director a the hands of a receiver, trustee, or )	
	Laurence F.	no of person signing)	-
	Director	ىد	
<del></del>		erson signing)	<b></b>