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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	180	
DOCUMENT NUMBER: NO 7000	0000654	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Lynn D. Griff (Name of	Contact Person)	
Project 180	Toc,	
11525 Brian	(ales brive Address)	
TAX FC (City/ Sta	32221 te and Zip Code)	
E-mail address: (to be use	SCO AMQ Cod for future annual report notification	<u>o W</u>
For further information concerning this matter, pleas	e call:	
Lynn D. Griffin Sr (Name of Contact Person)	. at (904) 350 (Area Code & Daytime 1	- 6031 Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Department of	State:
\$35 Filing Fee	☐ \$43.75 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, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir	,

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 5, 2011

LYNN D. GRIFFIN SR. PROJECT 180 INC. 11525 BRIAN LAKES DRIVE JACKSONVILLE, FL 32221

SUBJECT: PROJECT 180 INC. Ref. Number: N07000000654

We have received your document for PROJECT 180 INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 311A00015944

Division of Cornerations - P.O. BOX 6327 - Tallahassee, Florida 3231

Articles of Amendment

to

Articles of Incorporation

ωf

Drotect 180 Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
N07000000654	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopthe following amendment(s) to its Articles of Incorporation:	ts
A. If amending name, enter the new name of the corporation:	
ν/A	(U) (U)
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.	器器
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	CORPORATIONS
$\frac{W/A}{}$	TIONS
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
$\frac{N/A}{N/A}$	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent:	
New Registered Office Address: (Florida street address)	
$\mathcal{C}(City)$, Florida \mathcal{N}/\mathcal{V} (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	ie
Signature of New Registered Agent, if changing	
Signature of New Registered 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)

	<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	Menhair	Colorinnie Williams	SILO A. Phillip F.	Cridaz Add Remove
(Leonard Larramore	11525 Brian Cal	
V. (Chair	James Sims	JAX, FC 32221 816 A Philip Rom TAX, FC 3520	rcolph⊿ Add 6 □ □ Remove
		g or adding additional Articles, enter cl tional sheets, if necessary). (Be specific AHawe) (purpose	;)	article
	III.	. , ,		
				
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"This organization is organized exclusively for charitable purpose within the meaning of section 501(c)(3) of the Internal Revenue Code.

"Notwithstanding any other provision of these Articles, the organization shall not carry on any other activities not permitted to be carried on by an organization exempt from Federal income tax as an organization described in section 501(c)(3) of the Internal Revenue Code (or corresponding section of any future federal tax code.

"Upon the dissolution and winding up of this organization, after paying or adequately providing for the debts and obligations of the organization, the remaining assets shall be distributed to a nonprofit fund, foundation or corporation organized and operated exclusively for the purposes specified in section 501(c)(3) of the Internal Revenue Code and which has established its tax-exempt status under that section.

The date of each amendment(s) adoption: 6/72/11
The date of each amendment(s) adoption: $\frac{C}{2^2}/\frac{1}{1}$ Effective date if applicable: $\frac{C}{2^2}/\frac{1}{1}$
(no more than 90 days after amendment file date)
Adoption 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 6/22 [] Signature
(By the chairman or 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)
(Typed or printed name of person signing)
President (Title of person signing)