

No 7000001995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

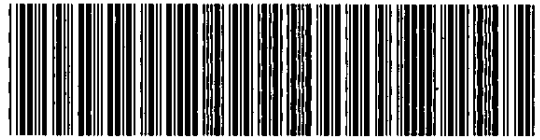
(Business Entity Name)

(Document Number)

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09 MAR 20 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NC  
27

FILED  
09 MAR 20 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

Rocking for Parkinson's Disease Research Foundation, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

NO 7000000 1995

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

A Reason to . . . INC.

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.

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

Stephanie B. Levick  
540 Carillon Parkway #3006  
St. Petersburg, FL 33716

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

Same as above

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)

(City)

Florida

(Zip Code)

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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.

\_\_\_\_\_  
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>	<u>Type of Action</u>
<u>VP</u>	<u>Ryan Parker</u>	<u>6135 7th</u> <u>Ave N. ST. Ptk</u> <u>FL 33710</u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>CFO</u>	<u>Scott Kravetz</u>	<u>6445 8th Ave N</u> <u>St Petersburg, FL</u> <u>33710</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Executive Director</u>	<u>Josh Newberg</u>	<u>508 South Glen</u> <u>Tampa FL 33609</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Treasurer</u>	<u>Shivas Patel</u>		<input checked="" type="checkbox"/> remove

← change address

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 3/10/09Effective date if applicable: \_\_\_\_\_

(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 ~~12/23/08~~ 3/10/09Signature Stephanie B. Levick

(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)

Stephanie B. Levick

(Typed or printed name of person signing)

President

(Title of person signing)