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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	RIDA BIODIVERSITY 	FOUNDATION	E, INC.	
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fo	ee are submitted for filin	1g.		
Please return all correspondence concerning	this matter to the follow	wing:		
James Brian Schlachta				
	(Name of Co	ontact Person)	· · ·	-
	(Firm/ C	ompany)	<u> </u>	
1735 NW 44th ave				
	(Add	iress)		
Gainesville, Florida 32605				
	(City/ State a	ınd Zip Code)		
floridabiodiversityfoundation@gmail.com				
E-mail address: (to be used for future an	nual report notifi	cation)	
For further information concerning this matt	er. please call:			
James Brian Schlachtya		352 at	278-2320	
(Name of Conta	act Person)	(Area Co	ode) (Daytime To	elephone Number)
Enclosed is a check for the following amour	it made payable to the I	lorida Departme	nt of State:	
S35 Filing Fee S43.75 Filing Fee Certificate of	ng Fee & S43.75 Fil of Status — Certified C (Additional enclosed)	Copy Copy is Copy is (852.50 Filing Fee Certificate of Status Certified Copy Additional Copy is Enclosed)	
Mailing Address Amendment Section				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	of	
THE FLORIDA BIODIVERSITY FOUNDATION, INC.		
(Name of Corporation as curren	ly filed with the Florida Dept, of	State)
THE FLORIDA BIODIVERSITY FOUNDATION, INC.		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation.		oration adopts the following
N/A		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbi	
B. Enter new principal office address, if applicable:	1618 NW 55th Place	<u> </u>
(Principal office address MUST BE A STREET ADDRESS	Gainesville, Florida 32653	
		ASS.

D. <u>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:</u>

Name of New Registered Agent:	James Brian Schlachta	
	1618 NW 55th Place	
New Registered Office Address:		rida street address)
	Gainesville	, Florida 32653
	#Circl	(Zin Code)

1618 NW 55th Place

Gainesville, Florida 32653

New Registered Agent's Signature, if changing Registered Agent:

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

51.

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 De V Mike Je SV Sally Se	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Emmel, Thomas C Dr.	1717 NW 45th Ave
Add			Gainesville, Fl 32605
X Remove			
2) X Change	PTD	Schlachta, James Brian	1735 NW 44th Ave.
Add			Gainesville, Fl 32605
Remove			
3) Change	D	Cotter, Anthony J. ESQ.	9253 Tibet Point Circle
Add			Windermere, Fl 34786
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional s.	heets, if necessary).	(Be specifie)	ange(s) here:				
							
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the members and the number of votes cast for the arwas/were sufficient for approval.	nendment(s)
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	was/were
Dated 08/14/2018	
Signature /	
(By the charman or vice chairman of the board, president or other officer- have not been selected, by an incorporator — if in the hands of a receiver, other court appointed fiduciary by that fiduciary)	
James Schlachta	
(Typed or printed name of person signing)	
Treasurer / Director	
(Title of person signing)	