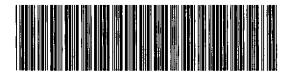
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: T.J. Redd	lick Bar Fou	ndation,Inc.
DOCUMENT NUMBER: NO700002		
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Sidney C. Calloway, Pre	sident	
	(Name of Contact Person	)
T.J. Reddick Bar Associa	ation	
	(Firm/ Company)	
P.O. Box 1500		
	(Address)	
Fort Lauderdale, FL 333	302	
	(City/ State and Zip Code	*)
bjohnson@brandi	ijohnsonlega	al.com
E-mail address: (to be used	for future annual report r	notification)
For further information concerning this matter, please	call:	
Sidney C. Calloway	at (954	847-3833
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$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		Address
Division of Corporations	Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

1. J. Reddick bar Foundation,			
(Name of Corporation as currently filed wi	th the Florida Dept. of Sta	<u>te</u> )	
N07000002796			
(Document Number	of Corporation (if known)	·	
ursuant to the provisions of section 617.1006, Florimendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida Ne</i>	ot For Profit Corporation adopts	the following
. If amending name, enter the new name of the	corporation:		
			The new
ame must be distinguishable and contain the word Company" or "Co." may not be used in the name		rated" or the abbreviation "Cor	p." or "Inc."
s. <u>Enter new principal office address, if applicat</u> Principal office address <u>MUST BE A STREET AL</u>			
	<u> </u>		
. Enter new mailing address, if applicable:	<del> </del>		
(Mailing address MAY BE A POST OFFICE B	<u> </u>		
	<del></del>		
If amending the registered agent and/or regist new registered agent and/or the new registere		rida, enter the name of the	
Name of New Registered Agent:			
		-	
<del></del>	(Florida street addres	:s)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
lew Registered Agent's Signature, if changing R	egistered Agent:		
hereby accept the appointment as registered agent		ecept the obligations of the positi	ion.
Signature of N	New Registered Agent, if cha	unging	i ci
	Page 1 of 4		
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		(A)	$\kappa$ $\ddot{\mathcal{D}}$ $f$

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	V Mil	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	D,T	Mertella Burris	1500 P.O. Box
Add			Fort Lauderdale, FL33302
Remove			
2) X Change	S,T	Brandi Johnson	1500 P.O. Box
Add			Fort Lauderdale, FL33302
Remove			
3) Change		Kimberly Coward	1500 P.O. Box
Add			Fort Lauderdale, FL33302
X Remove			
4) X Change	P,D	Sidney Calloway	1500 P.O. Box
Add			Fort Lauderdale, FL33302
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change	D	Alan C. Nash	1500 P.O. Box
X Add			Fort Lauderdale, FL33302
Remove	,		-
6) Change	D	Burnadette Norris-Weeks	1500 P.O. Box
X Add			Fort Lauderdale, FL33302
Remove			

(attach additional sheets, if necessary). (Be specific)
7. Add- D, Celena Nash, 1500 P.O. Box, Fort Lauderdale, FL33302
8. Add- D, Michael Bostick, 1500 P.O. Box, Fort Lauderdale, FL33302
9. Add- D, Daphne Jean-Pierre, 1500 P.O. Box, Fort Lauderdale, FL33302
10. Add- D, Terrence Hill,1500 P.O. Box, Fort Lauderdale, FL33302
,

The	date of each amendment(s) adoption: July 12, 2012
	ective date if applicable: July 12, 2012
	(no more than 90 days after amendment file date)
Ade	option 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 December 12, 2012
	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)
	Sidney C. Calloway,
	(Typed or printed name of person signing)
	President
	(Title of person signing)