N07000004249

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SECRETARY OF STATE ALLAHASSEE. FLORID

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: LIBRARY SYS	STEM FOUNDATION	OF LEE COUNTY, INC.
DOCUMENT NUM	IBER: N07000004249	:	
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
. All of the second		ginia Yates	·
	(Name of	Contact Person)	
	(Firm	n/ Company)	
		Tower Drive	
	(,	Address)	
		al, Florida 33904	
	(City/ Sta	te and Zip Code)	
		ombarqmail.com ed for future annual report noti	fication)
For further informati	on concerning this matter, pleas	e call:	
Virginia Yates		at (239) 433-5	
(Name	e of Contact Person)	(Area Code & Day	ytime Telephone Number)
Enclosed is a check	for the following amount made p	payable to the Florida Departm	ent of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status		☐ \$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 Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	ations nter Circle

Articles of Amendment Articles of Incorporation of

All States of States as LIBRARY SYSTEM FOUNDATION OF LEE COUNTY, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N07000004249 (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: LIBRARY FOUNDATION OF LEE COUNTY, 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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) Florida (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.

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)

Title	Name	Address	Type of Action
			Remove
(attach a	dditional sheets, if ned	nal Articles, enter change(s) here: sary). (Be specific) pration is organized exclusively for c	charitable, religious,
education	nal, and scientific p	poses, including, for such purposes	s, the making of
distributio	ons to organization	qualifying as organizations exempt	from federal income tax
under sec	ction 501(c)(3) of th	Internal Revenue Code, or corresp	onding sections of any
future fed	eral tax code. Spe	ifically, the intended purpose of the	organization is to provide,
support a	nd supplement the	brary services of Lee County, to as	sist generally in the
promotion	of reading, literac	and media education as well as to	engage in any lawful act
or activity	for which corporat	ns not for profit may be formed und	der the Florida Not For
Profit Cor	poration Act.		

The date of each amendment(s	s) adoption: February 10, 2010
	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or me adopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated_Febru	uary 10, 2010
Signature	Vicania Gates
(By t	he chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Virginia Yates
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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