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SECRETARY OF STATE





GLIMMER OF LIFE FOUNDATION, INC.

9003 TAFT STREET PEMBROKE PINES, FLORIDA 33024-4676 954.658.3740 985.436.7896 fax

May 11, 2010

Secretary of State Division of Corporations Clifton Building Amendment Section 2661 Executive Center Circle Tallahassee, Florida 32301

RE: GLIMMER OF LIFE FOUNDATION, INC.

Articles of Amendment to Articles of Incorporation, Inc.

Gentlemen:

Pursuant to my conversation with Irene (850) 245-6050 (3) of your office on this date, enclosed herewith please find the following regarding the above-referenced matter:

- 1. Original and one copy of Articles of Amendment to Articles of Incorporation, Inc., of Glimmer of Life Foundation, Inc.;
- 2. Glimmer of Life Foundation, Inc., in the amount of \$43.75 to cover the Filing Fee of \$35.00 and Certified Copy Fee of \$8.75;
- 3. Return FedEx envelope with Airbill Tracking number 8709 4512 9326.

If the Articles of Amendment to Articles of Incorporation, Inc., meet with approval, please return a certified copy of same to the undersigned in the enclosed pre-paid FedEx envelope (Airbill Tracking 8709 4512 9320). Should you have any questions or concerns regarding this matter, please do not hesitate to telephone the undersigned. If necessary, I will accept a collect telephone call from your office.

Thank you in advance for your assistance in this very important matter.

Sincerely,

Glimmer of Life Foundation, Inc.

Eleonora Bonfint, President

EB/sca C Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GLIMMER OF	LIFE FOUNDATION	, INC.
DOCUMENT NUM	BER: N07000006149		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
		ORA BONFINI	
	(Name of	f Contact Person)	
	GLIMMER OF LI	FE FOUNDATION, INC.	
	(Firm	n/ Company)	
	9003 T	AFT STREET	
	(Address)	····
	PEMBROKE PI	NES, FLORIDA 33024	
		te and Zip Code)	
	glimmer E-mail address: (to be use	oflife@aol.com	fication)
For further information	on concerning this matter, pleas	e call:	
ELEONORA BON	IFINI	at (954) 658-3	740
(Name	of Contact Person)	(Area Code & Day	740 vtime Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departm	ent 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)
	ng Address	Street Address	ŕ
	ndment Section ion of Corporations	Amendment Section	
	Box 6327	Division of Corpora Clifton Building	MUONS
	nassee, FL 32314	2661 Executive Cer	nter Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of

GLIMMER OF LIFE FOUNDATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N07000006149

(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:

e new name must be distinguishable an breviation "Corp." or " Inc." <u>"Compan</u>		
Enter new principal office address, if rincipal office address MUST BE A STR		
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
If amending the registered agent and/		s in Florida, enter the name of t
If amending the registered agent and/ new registered agent and/or the new a		s in Florida, enter the name of t
		s in Florida, enter the name of t
new registered agent and/or the new i		
Name of New Registered Agent:	egistered office address:	et address), Florida
Name of New Registered Agent:	egistered office address: (Florida stree (City)	et address), Florida (Zip Code)

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
			
(attach ad	ling or adding additional Articled ditional sheets, if necessary). In the same of the sam	les, enter change(s) here: (Be specific) clusively for charitable, religio	us, educational,
and scien	tific purposes, including for	such purposes, the making o	f distributions to
organizati	ons that qualify as exempt	organizations under section 5	601 (c) (3) of the
Internal R	evenue Code, or correspon	ding section of any future fed	leral tax code.
Upon t	he dissolution of the organia	zation, assets shall be distrib	uted for one or more
exempt pu	urposed within the meaning	of section 501 (c) (3) of the t	ntemal Revenue Code, q
correspon	ding section of any future fe	ederal tax code, or shall be di	stributed to the Federal
Governme	ent, or to a state or local gov	ernment, for a public purpos	e. Any such assets
not dispos	sed of shall be disposed of I	by a Court of Competent Juris	sdiction of the county
in which th	ne principal office of the org	anization is then located, exc	clusively for such
purposes	or to such organization or o	rganizations, as said Court s	hall determine, which
are organ	ized and operated exclusive	ely for such purposes.	
		<u>· </u>	

The date of each amendment(s) a	adoption: May 11, 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 ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or mem adopted by the board of directors	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated_May 11,	2010
Signature	
have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, of ourt-appointed fiduciary by that fiduciary)
_	Eleonora Bonfini
_	(Typed or printed name of person signing)
_	President
	(Title of person signing)

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