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## N0700000 6489

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(Document Number)	03/23
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<u>CO</u>	VER LETTER
TO: Amendment Section	
Division of Corporations	
THE LULA MCGRADY FC NAME OF CORPORATION:	DUNDATION INC.
N0700006489	
DOCUMENT NUMBER:	
Please return all correspondence concerning this matter to the	
Dr. Dorothy E. Hooks	
	of Contrast Demonst
(Name)	of Contact Person)
The Lula McGrady Foundation. Inc.	
(Fi	rm/ Company)
732 Trevino Drive Lot 2451	
	(Address)
Lady Lake, FL 32159	
	tate and Zip Code)
drdehooks@lulamegrady.org E-mail address: (to be used for futu	me annual report polification)
For further information concerning this matter, please call;	
Dr. Dorothy E. Hooks	352 617-4814 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number
Enclosed is a check for the following amount made payable to	the Florida Department of State:
Certificate of Status Certif	5 Filing Fee &\$52.50 Filing Feefied CopyCertificate of Statusitional copy isCertified Copyosed)(Additional Copy is
	Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tuthburgen EL 22214	The Centre of Tallahassee
Tallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303	

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	·			Article	s of Amendment
					to
				Articles	of Incorporation
					of

THE LULA MCGRADY FOUNDATION. INC.				23 511 12: 50
(Name of Corporation as currently filed with the	Florida Dep	of. of State)		
N07000006489				
(Docume	ent Number o	of Corporation (if kno	own)	
Pursuant to the provisions of section 617,4006, Flori amendment(s) to its Articles of Incorporation:	ida Statutes, 1	this <i>Florida Not For</i>	Profit Corp	<i>pration</i> adopts the following
A. If amending name, enter the new name of the N/A	<u>corporation</u>	<u>:</u>		11
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.		i" or "incorporated"	or the abbr	The newThe new
B. Enter new principal office address, if applicab	ole: 7	732 Trevino Drive		
(Principal office address <u>MUST BE A STREET AL</u>	NADECCY	ot 2451		
	La	idy Lake, FL 32159	·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	7 30X) 7	32 Trevino Drive		
· · · · · · · · · · · · · · · · · · ·		st 2451		
	 	lady Lake, FL 32159		
D. <u>If amending the registered agent and/or regist</u> new registered agent and/or the new registere			nter <u>(he</u> na	me of the
		E. Hooks		
	732 Trevino Drive Lot 2451			
- <u>New Registered Office Address;</u>		(Flor	nda street addie	(25)
	Lady Lake			, Florida 32159
-		(City)		(Zip (Tode)
<u>New Registered Agent's Signature, if changing Re</u> I hereby accept the appointment as registered agent.	egistered Ag . – I am famili	<b>ent:</b> <i>iar with and accept th</i> $x, t^2$		C

Dr. Dr. Hur E, DOUC Nignature 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)

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John D</u> V <u>Mike J</u> SV <u>Sally S</u>	ones	
Type of Action (Check One)	<u>_Title</u>	Name	<u>Addres</u> s
E) Change Add	<u> </u>	Mikita Milner	302 Sandy Oak Circle Apt 304
× Remove			Leesburg, FL 34748
2) <u>×</u> Change Add	TS	Chandra S. Garry	735 S HWY 27/441 Apt 125 Bldg 9
Remove           3.)         Change           Add           Remove	<u></u>	Minister Janie Church	Lady Lake, FL 32159 P.O. Box 6547 Tampa, FL 33608
4) Change Add			
Remove			<u>_</u>
5) Change Add			
Remove			
6) Change Add		·	
Remove			
1. 1.6			

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

I am not only changing the Principle physical address, but also the mailing address. Mikita Milner is no longer with the

organization. Chandra S. Garry is the Secretary and Tresurer now. Also, Minister Janie Church is the Vice-President.

I am also changing the Registered Agent from SPIEGEL & UTRERA. P.A.to Dr. Dorothy E. Hooks, and changing the

Registered Agent address to 732 Trevino Drive Lot 2451, Lady Lake FL 32159.

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The date of each amendment(s) adoption:	January 1, 2014	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		

(no more than 90 days after amendment file date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Darad	March 18, 2020
Dated	( (
Signature	A. Dorothy E. HOOLS
	(By the chairman or vice chaiffhan 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
	have not been selected, by an incorporator - if in the hands of a receiver, trustee, or

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s of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Dr. Dorothy E. Hooks

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(Typed or printed name of person signing)

President & Director

(Title of person signing)