N0700009833

(Re	equestor's Name)	,
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phor	ie #)
PICK-UP	■ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	- Certificate	s of Status
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none Change

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2009 AUG -3 AM 8: 45
SECRETARYAGE STATE

80R 109

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Grove Isle Charity Inc.				
DOCUMENT NUM	MBER: N07000009833		 -	
The enclosed Article	es of Amendment and fee are submi	itted for filing.		
Please return all corr	respondence concerning this matter	to the following:		
		Ferrand		
	(Name of Co	ontact Person)		
	(Firm/ C	Company)		
	8425 SW 8	31st Terrace		
·	(Ad	dress)		
		FL 33143		
	(City/ State a	and Zip Code)		
	alvaroferrand E-mail address: (to be used f	d@yahoo.com or future annual report notificat	ion)	
For further informati	ion concerning this matter, please co	all:		
Alvaro Ferrand		at (305 ₎ 328 9074		
(Name	e of Contact Person)	(Area Code & Daytime	Telephone Number)	
Enclosed is a check	for the following amount made pays	able to the Florida Department of	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)	
Ame Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301		

FILED

Articles of Amendment to Articles of Incorporation of

2009 AUG -3 AM 8: 49
SECRETARY OF STATE
TALLAHASSEE, FLORID:

Grove Isle C	harity Inc.	
(Name of Corporation as currently fi	led with the Florida Dept. of State)	
. N070000	09833	
	Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida the following amendment(s) to its Articles of Incorporate		<i>oration</i> adopts
A. If amending name, enter the new name of the co	erporation:	
Legacy Grove E	indowment Inc.	
The new name must be distinguishable and contain abbreviation "Corp." or "Inc." "Company" or "Co."	the word "corporation" or "incorporated"	or the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	(X)	
(Arming university (Arming unive	<u> </u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered		me of the
		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City) (Zip (Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent position.		gations of the
Signatur	re of New Registered Agent, if changing	
9		

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> Address **Type of Action** ☐ Add ____ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

***···

The date of each amendment(s) adoption: July 21 2009			
	(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 a was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) al.		
There are no members or men adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were ors.		
Dated_July 21 Signature	2009		
(By the	e 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, or court appointed fiduciary by that fiduciary)		
	Alvaro Ferrand		
	(Typed or printed name of person signing)		
_	President		
	(Title of person signing)		

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1. Lee