## MONDO 11269

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(Ac	idress)		
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

33P				
NAME OF CORPORATION		GELO FOUNDATION	INC	
DOCUMENT NUMBER: N	<b>0</b> 7000011269	···		
The enclosed Articles of Ame	ndment and fee are subn	nitted for filing.		
Please return all corresponden	ice concerning this matte	r to the following:		
MARGARET HEICHBERGE	ER			
		(Name of Contact Person	n)	
DR JOSEPH P D ANGELO F	FOUNDATION INC		•	
		(Firm/ Company)	1 11011111 1 11111111111111111111111111	
400 POINCIANA DR				
		(Address)		
HALLANDALE, FL 33009				
		(City/ State and Zip Cod	e)	
edwardw_hawkins@att.net				
E-r	nail address: (to be used	for future annual report	notification)	
For further information concer	rning this matter, please	call:		
MARGARET HEICHBERGE	ER	(30 at	95) 770-43 <b>4 4</b>	
(t	Name of Contact Person)		rea Code) (Daytime Telephone Num	ıber)
Enclosed is a check for the fol	llowing amount made pay	yable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Ad Amendment			Address Iment Section	
AHERUHEH	. 14.4.111211	Amena	unent accidii	

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

(Name of Corporation as cur	rently filed with the F	orida Dept. of State)		
DR JOSEPH P D'ANGELO FOUNDATION INC	N()'1044	)[[269		
(Document No	umber of Corporation (if	known)		
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not</i> A	For Profit Corporation add	opts the follow	wing
A. If amending name, enter the new name of the corpo	oration:			
			The	new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorpora	ted" or the abbreviation "(	Corp." or "In	ис."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u> )		<del></del>	<del></del>
				—
			5:-=	
C. Enter new mailing address, if applicable:				• •
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			<u> </u>	
			<u> ဗိုးလ ယ်</u> mc	
D. If amending the registered agent and/or registered	office address in Florid	a, enter the name of the		<i>!</i>
new registered agent and/or the new registered offi			景" 造	5
Name of New Registered Agent:				
		(Florida street address)	<del></del>	
New Registered Office Address:		, ,		
<u></u>		, Florida _		
	(City)	(Zip Co	ode)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am		pt the obligations of the po	osition.	
<u></u>	Signature of New Reg	istered 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: X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn <u>Doe</u> ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	JAMES HURD	235 LAWRENCE WOODS
X Add			ORCHARD PARK, NY 14127
Remove			
2) Change	D	CRAIG HEICHBERGER	1424 SWAMP FOX LANE
X Add			CHARLESTOWN, SC 29412
Remove			
3) Change	<u>D</u>	LYNN MARIE COUFIELD	254 WOOD CREEK WAY
XAdd			ACWORTH, GA 30101
Remove			
4) Change	<del></del>	•	
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)				
	,			
	•			
	· · · · · · · · · · · · · · · · · · ·			
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			06/01/2017	
	date of each amer this document was		tion:	, if other than the
	THE GOVERNMENT WAS	06/01/2	017 .	•
Effe	ctive date <u>if appli</u>		017	
			(no more than 90 days after amendment file date)	
			does not meet the applicable statutory filing requirements, this date tment of State's records.	will not be listed as the
Ado	ption of Amendme	ent(s)	(CHECK ONE)	
	The amendment(s) was/were sufficien		ted by the members and the number of votes cast for the amendment	(s)
	There are no memi adopted by the box		s entitled to vote on the amendment(s). The amendment(s) was/were	٠,
	Dated	06/02/2017	<del></del>	
	Signature			
	•	have not been s	or vice chairman of the board president or other officer-if director selected, by an incorporator — if in-the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
		MARGARE	T HEICHBERGER	
		<del> </del>	(Typed or printed name of person signing)	-
		PRESIDEN	Γ	
			(Title of person signing)	-