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COVER LETTER

TO: Amendment Section **Division of Corporations**

| NAME OF CORPORATION: ORGAN | DONOR AWARENEW FOUNDATION INC |
|------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fe | e are submitted for filing. |
| Please return all correspondence concerning | this matter to the following: |
| NEAL BIRA | me of Contact Person) |
| (Nar | ne of Contact Person) |
| ORGAN DONOR | AWARENESS FOUNDATION INC (Firm/Company) |
| 11231 HERUN | BAY BLVO #3615 |
| CORAL SPRINGS, | FIRST 33v76 y/ State and Zip Code) |
| For further information concerning this matt | |
| Weal Bira (Name of Contact Person) | at (954) 304 - 6485 (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amour | nt made payable to the Florida Department of State: |
| □\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status | Status Certified Copy (Additional copy is enclosed) \$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 Corporations Clifton Building 2661 Executive Center Circle |

Tallahassee, FL 32301

1/18/2009

To Whom it May Concern,

We are removing 2 Officer's Names and Changing 2 Officer's Title, so we are showing on the form as if all 4 are being added.

Please call if you have any questions or need additional information. We hope we completed the form correctly, and if not, please call so that we can have it resolved over the phone.

Thanks for your help

Regards

Neal Bira

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Compration and the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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: VEAL BIRA 11231 | ORGAN DONOR AWAR | CENESS FOR | INDATION INC | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------|--------------------------------|---------------------------|
| Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corgulation and the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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: VEAL BIRA | (Name of Corporation as curre | ently filed with th | <u>he Florida Dept. of Sta</u> | ate) |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corgulation and the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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: VEAL BIRA | | | | TAST LINES |
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| 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 agent and/or the new registered agent and/or the new registered office address: Name of New Registered Agent: VEAL BIRA | A. If amending name, enter the new name of | f the corporation | <u>ı:</u> | 3: 01 |
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| Name of New Registered Agent: New Registered Office Address: | | | | |
| Name of New Registered Agent: New Registered Office Address: | | | | |
| New Registered Office Address: 11231 HERON BRY BLVD # 3615 (Florida street address) | | | | iter the name of the |
| New Registered Office Address: [1231 HERON BAY BLVD # 3615] (Florida street address) CORAL SORING, Florida 33076 | Name of New Registered Agent: | NEAL BI | IRA | |
| New Registered Office Address: (Florida street address) CORAL SORING, Florida 33076 | | 117.31 HE | RAN BALBIN | n #3615 |
| CORAL SORINGS | New Registered Office Address | (Flori | ida street address) | <u>y</u> 11 0013 |
| CORAL DORINGS, Florida 330/1 | | | | 22-21 |
| | | WHAL SPRI | Maj | , Florida_ <u></u> |
| (City) (Zip Code) | | , | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent: | New Registered Agent's Signature, if changi | ing Registered A | gent: | |
| I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of | | | | ept the obligations of th |
| position. | position. | 1 | . | |
| Signature of New Registered Agent, if changing | | Meal F | Lova | |
| Signature of New Registered Agent, if changing | | Signature of New | Registered Agent, if ch | ianging |

Page 1 of 3

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> Fitle</u> | <u>Name</u> | | Address | Type of Acti | <u>on</u> |
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| The date of each amendment | t(s) adoption: 1/19/09 |
|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date if applicable: | |
| 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/we was/were sufficient for app | are adopted by the members and the number of votes cast for the amendment(s) aroval. |
| There are no members or adopted by the board of di | members entitled to vote on the amendment(s). The amendment(s) was/were rectors. |
| Dated | 1/19/09 |
| Signature | Meal Born |
| (By | the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary) |
| | NEAL BIRA |
| | (Typed or printed name of person signing) |
| | CHAIRMAN OF THE BOARD |
| | (Title of person signing) |

Page 3 of 3