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OCT -3 2013

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Organ Donor Awareness Foundation, In	C.

N0800004460

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Selena Samale

(Name of Contact Person)

Perlman, Bajandas, Yevoli & Albright P.L.

(Firm/ Company)

200 S. Andrews Ave STE 600

(Address)

Fort Lauderdale FL 33301

(City/ State and Zip Code)

neal@organdonorhero.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Selena Samale

954

806-1802

(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:

\$35 Filing Fee

Certificate of Status Certified Copy

\$43.75 Filing Fee & 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

OVER

Articles of Amendment Articles of Incorporation

	1	IL	ED	
18		24	· Å#	8:48
SEC	RETA AHAS	RY	OF S . Fl i	TATE: Drinki

Organ Donor Awareness Foundation, Inc.

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

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(Document Number of Corporation (if known)

. If amending name, enter the new name	of the corporation:	
		TL
ame must be distinguishable and contain the Company" or "Co." may not be used in the		The abbreviation "Corp." or "I
Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>		
Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF		
If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, ent ristered office address:	er the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
New Registered Office Address:		_, Florida
New Registered Office Address:		
New Registered Office Address:	(City)	(Zip Code)

Page 1 of 4

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.

X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jone <u>s</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
X Change	CT	Neal Bira	11231 Heron Bay Blvd #3615
Add Remove			Coral Springs, FL 33076
2) Change	<u>VP</u>	Beth Nathanson	611 Lexington Ave
X Remove			Davie, FL 33325
3) Change	VP_	Aimee Weisberger	8887 Rockridge Glen Cove
Add X Remove			Boynton Beach, FL 33473
4) Change	ST	Marcia Gordon	4070 Tivoli Ct. Apt 104
Add X Remove			Lakeworth, FL 33467
5) Change	S	Selena Samale	11231 Heron Bay Blvd #3615
X Add			Coral Springs, FL 33076
6) Change	<u>COO</u>	Michael Saks	11231 Heron Bay Blvd #3615
X Add			Coral Springs, FL 33076
Remove			

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If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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. Dated Signature	
(By the chairman or vice chairman 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 other court appointed fiduciary by that fiduciary)	
Neal Bira NEA (BiRA	
(Typed or printed name of person signing) Chairman (Title of person signing)	