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DIVISION OF CORPORATIONS

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Briana M	farie Cox Foundation, Inc.
DOCUMENT NUMBER: N0800000522	27
The enclosed Articles of Amendment and f	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Barbara Gaidosh	
(Na	ame of Contact Person)
Briana Marie Cox Foundati	on, Inc.
· · · · · · · · · · · · · · · · · · ·	Firm/ Company)
286 Kensington Way	
	(Address)
Royal Palm Beach, FL 3341	4
(Ci	ty/ State and Zip Code)
For further information concerning this mat	tter, please call:
Maxine L Taylor	at ( <u>561</u> ) <u>842-1304</u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt made payable to the Florida Department of State:
\$35 Filing Fee \$\times \$43.75 Filing Fee \$\times \$\text{Certificate of Status}\$	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Stat 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

#### Articles of Amendment to Articles of Incorporation of

Briana Marie Cox Fo		<u>te</u> )
N0800000		<b>-</b>
(Document Number of Corpo	ration (if known)	
Pursuant to the provisions of section 617.1006, Florida Statuthe following amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Pr	rofit Corporation adopts
A. If amending name, enter the new name of the corpora	tion:	
The new name must be distinguishable and contain the we abbreviation "Corp." or "Inc." "Company" or "Co." may	ord "corporation" or "inco	orporated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
	<del>-</del>	
~ F		·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		er the name of the
Name of New Registered Agent:		
		_
New Registered Office Address: (Fl	orida street address)	_
		_, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I a position.	l Agent: m familiar with and accep	t the obligations of the
Signature of N	ew Registered Agent, if char	nging

## 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
(attach add Please ame Article III T Exclusively purposes, t	ditional sheets, if necessary).  end Article III to read:  The specific purpose for  for charitable, religious  the making of distribution	which this corporation is organized, educational, and scientifc purports to organizations that qualify a	oses, including for such
	ol tou and a	nal Revenue Code, or correspo	
Please Add	d Article IX:		
Article IX st	nould read:		
Article IX L	Jpon dissolution of this	organization:	
Upon disso	lution of the organizatio	n, assets shall be distributed for	one or more exempt
purposes w	ithin the meaning of sec	ction 501 (c)(3) of the Internal Re	evenue Code, or
correspond	ing section of any future	e federal tax code, or shall be dis	stributed to the federal
government	t, or to a state or local g	overnment, for a public purpose	. Any such assets not
disposed of	shall be disposed of by	the Court of Common Pleas of	the county in which
the principa	I office of the organizati	on is then located, exclusively fo	or such purposes or to

### 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) Title <u>Name</u> Address Type of Action ☐ Add ☐ Remove Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Article IX continued: such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

The date of each amendment(s) adoption: February 27, 2009			
Effective date <u>if applicable</u> :	February 27, 2009 (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	ere adopted by the members and the number of votes cast for the amendment(s)		
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.		
Signature (By hav	the charman or vice chairman of the board, president or other officer-if directors te not been selected, by an incorporator – if in the hands of a receiver, trustee, or the court appointed fiduciary by that fiduciary)		
	Maxine L Taylor  (Typed or printed name of person signing)		
	Incorporator		
	(Title of person signing)		