

(Řed	questor's Name)	
(Add	dress)	
(Ada	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	-
	Mills	_





11/19/24--01004--020 **43.75



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Job	Lamou	c F	2000	lation	lnC
DOCUMENT NUMBER: NO						
			_ :			
The enclosed Articles of Amendmen	it and fee are s	submitted for filing.				
Please return all correspondence con	cerning this n	natter to the followin	ā;			
Pave 1 Ge	rilloume		·			
		(Name of Conta	ct Person)			
· · · · · · · · · · · · · · · · · · ·		(Firm/ Com	pany)			
2134 Dax	r Stra	3 +				
2137 00	C 5(14)	(Addres	s)			
WPB FL	33401					
		(City/ State and	Zip Code)			
Pilguilaum						•
E-mail ad	idress: (to be t	used for future annua	l report no	tilication)	
For further information concerning the	his matter, ple	ease call:				
wanda Guilleum	e Ram	nire 2	at 50	Q l	4529	b252
(Name o	of Contact Per	rson)	(Area	Code)	(Daytime Tele	ephone Number)
Enclosed is a check for the following	g amount mad	e payable to the Flor	ida Departi	ment of S	State:	
□ \$35 Filing Fee □\$43.7 Certi	75 Filing Fee ificate of State	& S43.75 Filing Certified Copy (Additional ed enclosed)	y.	Certific Certific	Filing Fee cate of Status ed Copy onal Copy is sed)	
Mailing Address			Street Ac			
Amendment Section			Amendme			
Division of Corpor P.O. Box 6327	rations		Division of		rations Hahassee	
Tallahassee, FL 32	231.1				Street, Suite	810
rananassee, FL 52	,) (7		~~1J 14.	HOHIOC	Direct, Built	010

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

		VI ·	
Job	Lamon	Foundation	(1)

	1001		
(Name of Corporation as currently filed with the Flor	_		
	<u>000 5869</u>		
(Document A	Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida No.	t For Profit Corporation ado	pts the following
A. If amending name, enter the new name of the corp	poration:		
The Georges River E	Joillaume	toundation 11	$\bigcap \bigcap_{The\ new}$
name must be distinguishable and contain the word "con "Company" or "Co." may not be used in the name.	rporation" or "incorpor	uted" or the abbreviation "C	orp," or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	<u> </u>	
		<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	·)	:: :: ::::::::::::::::::::::::::::::::	2024 (1017) 2824 (1017)
	•		107
		· · · · · · · · · · · · · · · · · · ·	
		117	
D. If amending the registered agent and/or registered		ida, enter the name of the	PH 12:
new registered agent and/or the new registered of	ffice address:		် ဂို
Name of New Registered Agent:		••	
New Registered Office Address:		(Florida street address)	
		4 -	
	(City)	, Florida, (Zip Co	<u></u>
	• •	•	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I de-		eept the obligations of the pos	sition.
- many active and approximation and a segment of a segment of	y 	t and the	
	Signature of New Re	gistered 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>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change Add	5_	Glorie Guillaume	2134 Dock Street
Remove 2) Change Add	5	Warda Guilaume Ramirez	104 Sparrau dr Ap+104 APB EL BB411
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			·
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		rticles, enter change(s) here: . (Be specific)	
			

•		
	<u> </u>	
		 _
		
		
		 -
		
	-	
	· · · · · · · · · · · · · · · · · · ·	
The day of sole and add on the North		
	on:	, it other than the
date this document was signed.		
Personal des le soult de la		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man 90 days after amenament fite date)	
Note: If the date inserted in this block do document's effective date on the Department.	es not meet the applicable statutory filing requirements, this date will not beent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

Ø	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 9/19/2024				
	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)				
	Georges I Saac Guillaume (Typed or printed name of person signing)				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				