N0800007720

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | ldress) | |
| , (Ad | ldress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| , (Bu | ısiness Entity Nar | me) |
| (Do | ocument Number) |) |
| Certified Copies | _ Certificate: | s of Status |
| Special Instructions to | Filing Officer: | |
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DEPARTMENT OF STATE OF STATE

RECEIVED

09 MAY -4 PH 3:58
SECRETARY OF STA

5/4/09

COVER LETTER

TO: Amendment Section

Division of Corporations

| • | |
|--|------|
| NAME OF CORPORATION: Popular tal, Ophmistic Sister, in | |
| DOCUMENT NUMBER: 1080000 7720 | |
| The enclosed Articles of Amendment and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| M. Graham (Name of Contact Person) | |
| Posh foundation (Firm/Company) | |
| SDIOW. Carmon Ste 2608 (Address) | , |
| 781, 26 33619 (City/ State and Zip Code) | |
| For further information concerning this matter, please call: | |
| M. Grahon at (83) 389 3334 (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 \$\times \text{\$43.75 Filing Fee & Certificate of Status}\$\$ Certified Copy (Additional copy is enclosed) \$\text{\$(Additional Copy is enclosed)}\$\$ (Additional Copy is enclosed) | atus |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

09 MAY -4 PM 3:5

| (Name of Corporation as currently | filed with the Florida Dept. of State HAS PE. FLORIDA |
|--|--|
| 108000007720 | |
| (Document Number of | of Corporation (if known) |
| ursuant to the provisions of section 617.1006, Flori- e following amendment(s) to its Articles of Incorpo | da Statutes, this Florida Not For Profit Corporation adopts pration: |
| . If amending name, enter the new name of the POSH Loundar | corporation: Fin Inc. |
| he new name must be distinguishable and contain bbreviation "Corp." or "Inc." <mark>"Company" or "Co</mark> | n the word "corporation" or "incorporated" or the o." may not be used in the name. |
| . Enter new principal office address, if applicab Principal office address <u>MUST BE A STREET AL</u> | DDRESS) SOID W. Carmen S. |
| | S7E, 2608 |
| . Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B | 10x) 7pa, 2/ 33609 POB 263257 |
| | TP1 21 33685 |
| . If amending the registered agent and/or regist new registered agent and/or the new registered | ered office address in Florida, enter the name of the |
| Name of New Registered Agent: | |
| New Registered Office Address: | (Florida street address) |
| | , Florida |
| | (City) (Zip Code) |

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> | Name | Address | Type of Action |
|---------------------------------|---|--|--------------------|
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| (attach add | ng or adding additional Articles, enterelitional sheets, if necessary). (Be specifically the sheets). This Organizaha. | ic) | |
| exclus | suely for charita | bk, religious | educational |
| of f | de internal revenu | ue code, or | corresponding |
| | n of any Paper | • | |
| (b) | Ufin the disson | whom of this c | rganization. |
| Asset | 3 shall be dist | sibuled for o | ne or |
| mul | exempt purposes | whin the me | ming g |
| education | organization is organized exclusivel onal, and scientific purposes under le Code, or corresponding section o | section 501(c)(3) of the Inter | nal |
| more ex _ Revenu be distr | the dissolution of this organization kempt purposes within the meaning be Code, or corresponding section of ibuted to the federal government, or purpose. | of section 501(c)(3) of the In f any future federal tax code, | ternal or shall |

| The date of each amendment(s) adoption: 4/30-2007 | | | | |
|--|--|--|--|--|
| Effective date if applicable: | | | | |
| | (no more than 90 days after amendment file date) | | | |
| Adoption of Amendment(s) | (CHECK ONE) | | | |
| The amendment(s) was/we was/were sufficient for appr | re adopted by the members and the number of votes cast for the amendment(s) roval. | | | |
| There are no members or radopted by the board of dir | nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors. | | | |
| Dated | 5.4.9 | | | |
| Signature | Male I | | | |
| hav | the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary) | | | |
| | melanie Coron | | | |
| | (Typed or printed name of person signing) | | | |
| | CEO | | | |
| | (Title of person signing) | | | |

Page 3 of 3