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COVER LETTER

TO: Amendment Section Division of Corporations

Scenic Corridor NAME OF CORPORATION:	Foundation, Inc.
N08000009559	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Leigh Moore	
	(Name of Contact Person)
Scenic Corridor Foundation	
	(Firm/ Company)
755 Grand Boulevard, Suite B105, #202	
	(Address)
Miramar Beach, FL 32550	
	(City/ State and Zip Code)
sceniccorridor@gmail.com	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Leigh Moore	850 200-3229
(Name of Contact Pers	son) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	& 🗆 \$43.75 Filing Fee & is Certified Copy (Additional copy is enclosed) 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

Scenic Corridor Foundation, Inc.					
(Name of Corporation	n as current	tly filed with tl	ne Florida Dept.	of State)	• •
N08000009559					
(Docu	ment Numbe	er of Corporation	on (if known)		
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Florida i</i>	Not For Profit C	<i>orporation</i> ado	pts the following
A. If amending name, enter the new name of th	<u>ie corporati</u>	on:			
Scenic Walton, Inc.					The new
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam		ion" or "incorp	porated" or the a	abbreviation "C	
B. Enter new principal office address, if applications of the second of		N/A	-	_	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>	<u> BOX</u>)	N/A			19 MAR 14
D. If amending the registered agent and/or reginew registered agent and/or the new register			orida, enter the	name of the	TLOSE S
Name of New Registered Agent:	N/A				<u> </u>
	(Florida street address)				
New Registered Office Address			(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	N/A, Florida		, Florida _	I/A 	
	(City)		(Zip Cod	lip Code)	
New Registered Agent's Signature, if changing be been been been been been been deep the appointment as registered agent be appointment as registered agent been been been been been been been b			accept the obliga	utions of the pos	ition.
-	Ci.	unature of New	Runistarad Augus	u 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	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	Name	Address
1) Change		N/A	
Add			
Remove			
2) Change			
Add			_
Remove			
3) Change			
Add			~-~ <u></u> -
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional (attach additional sheets, if necessar	y). (Be specific)			
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		 		<u> </u>

	10/3/2018	
The date of each amendment(s) ac	loption:	, if other than the
ate this document was signed.		
12/1	/18	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo locument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will no partment of State's records.	of be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes east for the amendment(s) al.	
There are no members or mem adopted by the board of directors	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
2/19/19 Dated	1	
Signature	ef Moore	
have not be	rman of vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Leigh M	oore	
	(Typed or printed name of person signing)	
Preside	nt	
	(Title of person signing)	