## N0900004287

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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LAHASSEE, FLORIDA

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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Community Foundation, Inc	<del></del>	
N09000004287			
The enclosed Articles of Amendment and fee	are submitted for filing.		
Please return all correspondence concerning th			
Michael S. Smith			
	(Name of Contact	Person)	
Lesser, Lesser, Landy & Smith, PLLC			
	(Firm/ Compa	iny)	
101 Northpoint Parkway	•		
	(Address)	·	
West Palm Beach, FL 33407			
	(City/ State and Zi	p Code)	
msmith@lesserlawfirm.com			
E-mail address: (to	be used for luture annual r	eport notification	on)
For further information concerning this matter	, please call:		
Michael S. Smith		561 at	655-2028
(Name of Contact		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount to	made payable to the Florida	a Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Status Certified Copy (Additional copy enclosed)	Certi y is Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)
Mailing Address Amendment Section	-	Street Address Amendment Sec	tion

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Wellington Community Foundation, Inc.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
N09000004287		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute imendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adop	ts the following
A. If amending name, enter the new name of the corporati	ion:	
NA	·	The new
name must be distinguishable and contain the word "corporal" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Co	orp." or "Inc."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A	
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	.,
	,	
		≥ 55
		2-2 5
<ol> <li>If amending the registered agent and/or registered office a new registered agent and/or the new registered office a</li> </ol>		
new registered agent and of the new registered office a	1	93.55 4
Name of New Registered Agent:	~/ <del>A</del>	2 2 3 TO
	:	<u> </u>
New Registered Office Address:	(Florida street address)	ÅUI F
	Florida	
	(City), Florida (Zip Coa	le)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am factorise the appointment as registered agent.		ition
	The post	********
	ignature of New Registered Agent, if changing	<del></del>

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	$\underline{V} = \underline{Mik}$	n Doe se Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	т	Maria E. Becker	12794 Forest Hill Boulevard
Add			Suite 19F
X Remove			Wellington, FL 33414
2) Change	т	Hope Barron, CPA	c/o Barron & Kogan
X Add			12788 Forest Hill Boulevard
Remove			Suite 1003
3) Change			Wellington, FL 33414
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding addition to the additional sheets, if necessional sheets, if necessions and the additional sheets.	ssary). (Be specific)			
7/4	L .			
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	January 8, 2018	
The date of each amendment	(") " " (") " — , — — — — — — — — — — — — — — — — —	, if other than the
date this document was signed		
Effective date if applicable:	January 8, 2018	
	(no more than 90 days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements, this date will not be he Department of State's records.	e listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) oproval.	
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Janua Dated	ary 10, 2018	
Signature	Mu/5-52	-
have i	chairman of vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
Mi	ichael S. Smith	
_	(Typed or printed name of person signing)	
Se	cretary	
	(Title of person signing)	