

NO9000004330

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/26/09--01042--003 \*\*35.00

*Amend*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 JUL -9 AM 10:23

55555 JUL 10 2009



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 1, 2009

*Corrections made.  
Thanks*

HAROLD WEEKS, JR.  
MOTHER PERRY SCHOLARSHIP FUNDS, INC  
7855 SANCTUARY CIRCLE #2  
NAPLES, FL 34104

SUBJECT: MOTHER PERRY SCHOLARSHIP FUNDS, INC.  
Ref. Number: N09000004330

We have received your document for MOTHER PERRY SCHOLARSHIP FUNDS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page three of the amendment form is for a profit corporation. Please complete the attached form page 3 for nonprofit corporation and resubmit the entire form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 809A00022605

RECEIVED  
2009 JUL -9 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Mother Perry Scholarship Funds, Inc

**DOCUMENT NUMBER:** N09000004330

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Harold Weeks, Jr.

Name of Contact Person

Mother Perry Scholarship Funds, Inc

Firm/ Company

7855 Sanctuary Circle # 2

Address

Naples, FL 34104

City/ State and Zip Code

cahgweeks@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harold Weeks, Jr.

Name of Contact Person

at ( 239 )

455-2886

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 Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 JUL -9 AM 10: 24

Mother Perry Scholarship Funds, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N09000004330

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

NA

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

NA

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

NA

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

NA

New Registered Office Address:

(Florida street address)

(City)

, Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing



The date of each amendment(s) adoption: \_\_\_\_\_

(date of adoption is required)

June 3, 2009

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

June 3, 2009

Adoption of Amendment(s)

**(CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ 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 \_\_\_\_\_

7/7/09

Signature \_\_\_\_\_

Harold G. Weeks

(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)

HAROLD G. WEEKS

(Typed or printed name of person signing)

OFFICER + INCORPORATOR

(Title of person signing)

# MOTHER PERRY SCHOLARSHIP FUNDS, INC

7855 Sanctuary Circle # 2 / Naples, FL 34104

Document #: *NO 9000004330*

## **New Article II: Purpose**

This corporation is organized exclusively for one or more purposes specified in Section 501 (C) (3) of the Internal Revenue Code, including the making of distributions to organizations that qualify as exempt organizations under Section 501 (C) (3) of the Internal Revenue Code.

This is a non-stock, nonprofit corporation. The purpose is to engage in any lawful act or activity.

## **New article IX: Dissolution**

Upon the dissolution of the corporation, the board of directors shall, after paying all liabilities of the corporation, dispose all assets of the corporation in such manner, for charitable, educational, religious purposes within the meaning of the section 501 (C) (3) of the Internal Revenue Code. Any such assets not so disposed of shall be disposed of by the Court of Common Pleas in the county in which the principal office of the corporation is then located.