## 1109000005136

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(Ac	ldress)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
O9 NOV 12 PH 4: 15

Amendicc Mallulog

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Take Hope Aga	ainst Cancer, Inc.	
DOCUMENT NUM	BER: <u>N090000</u> 05136		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		a Bustamante Contact Person)	
	(.vano o.	Comment a crossing	
		Sardon, P.A.	
	(Fim	n/ Company)	
	5200 SW 8tl	h Street, Suite 250	
	(,	Address)	
	Miami.	Florida 33134	
		te and Zip Code)	
	cbustaman E-mail address: (to be use	te@takehope.org	ation)
For further information	on concerning this matter, pleas	e call:	
Cristina Bustama (Name	of Contact Person)	at ( <u>305</u> ) <u>7248639</u> (Area Code & Daytic	me Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departmen	t of State:
□\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address Indment Section It ion of Corporations Box 6327 Index Section 10	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente	ons

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ALCRESTA	
OS NOV 12 PM	SO,
P. 4.	15

(Name of Corporation as currently filed with the Florida Dept. of State)
N0900005136
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopt the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
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:
New Registered Office Address: (Florida street address)
, Florida
(City) (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

## 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>	<u>Name</u>	<u>Address</u>	Type of Action	
<u>VP</u>	David Farcy	6515 Collins Avenue, Apt. 1805 Miami Beach, Fl. 33141	☑ Add ☐ Remove	
DIR	Maria C. Buigas	10260 SW 130 Avenue Miami, FL 33186	☐ Add ☐ Remove	
<u>VP</u>	Jason A. Odio	1720 SW 13 Street Miami, Fl 33145	☑ Add ☐ Remove	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)  Articles of Incorporation must include the following provisions:  a) Take Hope Against Cancer. Inc. is organized exclusively for charitable purposes. including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code  b) Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501 (c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Please of the county				
	principal office of the organization			
<u>purposes or</u>	to such organization or organization	ons, as said Court shall deter	mine, which	
are organize	d and operated exclusively for suc	ch purposes.		

The date of each amendment(s) adoption: November 4, 2009	
Effective date <u>if applicable</u> :	(date of adoption is required) NOVEmber 12,2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or m adopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Signature	the 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)
	Cristina M. Bustamante (Typed or printed name of person signing)
	President
	(Title of person signing)