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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Pledge 5 Foundation Inc	· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMBER: NO900008396		
The enclosed Articles of Amendment and fee are submitted	for filing.	
Please return all correspondence concerning this matter to th	e following:	
Jason Bowman, PhD		
(Name of C	ontact Person)	
Pledge 5 Foundation Inc		
	Company)	
18b SW 2nd Ave		
(Ad	dress)	
Gainesville, FL 32601		
(City/ State	and Zip Code)	
jason@pledge5.org E-mail address: (to be used for fu	ure annual report notif	ication)
For further information concerning this matter, please call:		
Jason Bowman, PhD	_ at (352) 5	538-4364
(Name of Contact Person)		2 Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	o the Florida Departme	ent of State:
(Add	fied Copy litional copy is losed)	\$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 Articles of Incorporation of

,	Articles of	f Amendment		
	Articles of	to Incorporation		9/1.50
		of	,	S COLOR AS
Pledge 5 Foundation/Inc			· ·	M. OFFER
(Name of Corpo	ration as currentl	y filed with the Florida	Dept. of State)	200000
NO900008396				Pa Palin
(Documer	t Number of Corpo	oration (if known)		Mon of the Confession of the C
Pursuant to the provisions of section 617. Collowing amendment(s) to its Articles of		utes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the	;
A. If amending name, enter the new na	me of the corpora	ation:		
The new name must be distinguishable an "Corp." or " Inc." <u>"Company" or "Co.</u> "			rporated" or the abbreviation	-
3. Enter new principal office address,	if applicable:	18b SW 2nd Ave		_
Principal office address <u>MUST BE A S</u>		Gainesville, FL 32601		-
C. Enter new mailing address, if appli (Mailing address MAY BE A POST (18b SW 2nd Ave		-
		Gainesville, FL 32601	l	-
D. If amending the registered agent an new registered agent and/or the new			enter the name of the	-
Name of New Registered Agent:	Jason Bowman, F	PhD	<u>.</u>	
	18 SW 2nd Ave			į
New Registered Office Address:		(Florida street address)		
	Gainesville		, Florida 32601	
		(City)	(Zip Code)	•
New Registered Agent's Signature, if che hereby accept the appointment as registed			he obligations of the position.	
		3		
Sign	nature of New Kee	stored Agent, if changing	Ţ	

Page 1 of 4

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Nan</u>	<u>1e</u>	Address	
1) <u>P</u>	Jason Bowman,	PhD	18 SW 2nd Ave Gainesville, FL 32601	
2)				
3)		·		
4)		·····		
5)	- · · · · · · · · · · · · · · · · · · ·			
6)				
<u>if Removi</u>	NG an officer and/or director	, please list the title(s) an	d name of the officer/director	to be removed:
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>	
1) <u>VP</u>	Greer, Andrew	4)		
2) <u>S</u>	Vassilatos, Nicole	5)		
•				

attach additional shee	ng additional Artets, if necessary).	(Be specific)			
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 		<u>.</u>			

The date of each amendment(s) adoption: November 23, 2011				
Effe	ective date <u>if applicable</u> : November 23, 2011 (no more than 90 days after amendment file date)			
Ado	option 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.			
Ø	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 November 22, 2011			
	Signature			
	(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)			
	Jason Bowman, PhD			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

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