N0900000 8965

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SEP OF 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Howard Greenfic NAME OF CORPORATION:	eld Charitable Foundatio	on, Inc.	
N0900008965 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
Heather Scott			
	(Name of Contact Perso	on)	
Rosenthal Rosenthal Rasco LLC			
	(Firm/ Company)		
20900 NE 30th Ave. Suite 600			
	(Address)		
Aventura, FL 33180			
	(City/ State and Zip Cod	le)	
has@rrrlaw.com			
E-mail address: (to be used	for future annual report	notification)	
For further information concerning this matter, please of	eall:		
Heather Scott		95-937-030C	
(Name of Contact Person)	(A	rea Code) (Daytime Telephone Nu	mber)
Enclosed is a check for the following amount made pay	vable to the Florida Dep	artment of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Sertified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section		Address dment Section	
Amenament Section Division of Corporations		on of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment Articles of Incorporation

Artic	cles of Amendment	
Articl	to les of Incorporation	
	of	•
THE HOWARD GREENFIELD CHARITABLE FOUNDA	ATION, INC.	
(Name of Corporation as curre	ently filed with the Florida	Dept. of State)
N09000008965		<u> </u>
(Document Num	nber of Corporation (if know	n)
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Pi</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ıtion:	
		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	cation" or "incorporated" o	
B. Enter new principal office address, if applicable:	4987 N UNIVERSITY D	DRIVE
(Principal office address MUST BE A STREET ADDRESS	LAUDERHILL, FL 333	51
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4987 N UNIVERSITY II	DRIVE
	LAUDERHILL, FL 333:	51
	fice address in Florida, ant	er the name of the
D. If amending the registered agent and/or registered of	nce audiess in Livitua, ent	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		
new registered agent and/or the new registered office	address:) street nddress)
new registered agent and/or the new registered office	address:	a street address)
new registered agent and/or the new registered office Name of New Registered Agent:	address:	, Florida
Name of New Registered Agent:	address:	
new registered agent and/or the new registered office Name of New Registered Agent:	address: (Florida (City) d Agent:	Florida (Zip Code)

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	<u>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	WAYNE PETERSON	3003 S. CONGRESS AVE, #2C
Add X Remove			PALM SPRINGS, FL 33461
2) Change	<u>D</u>	MICHAEL RHODES	4987 N UNIVERSITY DRIVE
X Add			LAUDERHILL, FL 33351
3) Change	D	MIKEL RHODES	7609 DAVIE ROAD EXTENSION
Add X Remove			HOLLYWOOD, FL 33024
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here (Be specific)	;	
		<u> </u>	
	<u>.</u>		
		 	
			

•		
The date of each amendment(s) adoption: _ date this document was signed.	02/28/2017	, if other than the
Effective date if applicable:		
	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be of State's records.	e listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes east for the amendment(s)	
There are no members or members entitle adopted by the board of directors.	led to vote on the amendment(s). The amendment(s) was/were	
Dated 8 23 19		
Signature	7	
have not been selected	ice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or I fiduciary by that fiduciary)	
Keiry E	(Typed or printed name of person signing)	
Directo	(Title of parana cirring)	

(Title of person signing)