## N09000009557

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

1010 JAN 26 AM 10: 54

Amend

TB

JAN 28 2010

## **COVER\_LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: The Kaitlyn M	arie Gossett Charitable	e Foundation, Inc.
DOCUMENT NUM	BER: N09000009557		
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:	
		R. Gossett, Jr.	
	(Name of	Contact Person)	
	(Firm	n/ Company)	
<del></del>		JS 27 South	
	(,	Address)	
		ng, Fl 33870 te and Zip Code)	
	` •	embarqmail.com	
		d for future annual report notifi	cation)
For further information	on concerning this matter, pleas	e call:	
Gary R. Gossett,		at ( <u>863</u> ) 471-11	
(Name	of Contact Person)	(Area Code & Day	time Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departme	ent 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)
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corpora Clifton Building 2661 Executive Cen	tions

Tallahassee, FL 32301

## **Articles of Amendment** · to

A	rticles of Incorporation	410 JAN - C/
	of of organization of of ossett Charitable Foundation, orrently filed with the Florida Dept. of 09000009557	Inc. LAHASSE OF STARY
The Kaitlyn Marie Go	ssett Charitable Foundation,	Inc. LARY ARY
(Name of Corporation as cu	irrently filed with the Florida Dept. of	State) ASSEE STATE
N	09000009557	ORIOL
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617.10 the following amendment(s) to its Articles of		r Profit Corporation adopts
A. If amending name, enter the new nam	e of the corporation:	
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company		
B. Enter new principal office address, if a (Principal office address MUST BE A STR		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
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 r		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	<del></del>
		, Florida
	(City)	, Florida (Zip Code)
Now Dogistored Agent's Cignotum if the	nging Pogistored Agent.	
New Registered Agent's Signature, if cha I hereby accept the appointment as regist position.		ccept the obligations of the
-	Signature of New Projectored Agent if	ahanaina

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>		Address	Type of Action
				D Damara
				<del></del>
				☐ Add ☐ Remove
(attach aa	ing or adding additional sheets, if neco	essary). (Be spec		
Upon the	dissolution of the c	organization, ass	ets shall be distril	outed for one or more
exempt pu	rposes within the	meaning of secti	on 501(c)(3) of th	e Internal Revenue Code,
or corresp	onding section of a	any future federa	I tax code, or sha	II be distributed to the
federal go	vernment, or to a	state or local gov	ernment, for a pu	blic purpose. Any such
assets not	disposed of shall	be disposed of t	y the Court of Co	mmon Pleas of the
county in v	which the principal	office of the org	anization is then l	ocated, exclusively for
such purp	oses or to such or	ganization or org	anizations, as sa	d Court shall determine,
which are	organized and op	erated exclusive	ly for such purpos	es.
***				

The date of each amendment	s) adoption: 1/25/2010
Effective date if applicable:	(date of adoption is required) 1/25/2010
<del></del>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or adopted by the board of dir	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Dated/	-25-10 Levy R. Sont.
(By hav	the chairman or vice chairman of the board, president or other officer-if director e not been selected, by an incorporator — if in the hands of a receiver, trustee, er court appointed fiduciary by that fiduciary)
	Gary R. Gossett, Tr.
	(Typed or printed name of person signing)  President Sire Hor  (Title of person signing)