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JENNING PERSONS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Eagle Country Founda	ation Inc.			
	N09000010142				
DOCUMENT NUMBER: _	 .	<u> </u>			
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
Tami Spurlock					
	(Name of Contact P	erson)		
Eagle Country Inc.					
		(Firm/ Compan	y)		
16221 Rawls Road					
		(Address)			
Sarasota, FL 34240-9147					
	(City/ State and Zip	Code)		
tami@plow.org					
Е	-mail address: (to be used	for future annual re	port notificat	ion)	
For further information cone	erning this matter, please c	eall:			
Tami Spurlock		21	941	3227044	
	(Name of Contact Person)		(Area Code	(Daytime Telephone Nu	ımber)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida	Department o	of State:	
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Cer is Cer (Ad	2.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)	
Mailing A			reet Addres		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Fagle Country Foundation Inc.		
(Name of Corporation as co	rrently filed with the Florida Dept. of Sta	<u>(te</u>)
N09000010142		
(Document)	Rumber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corpora	ttion adopts the following
A. If amending name, enter the new name of the corp	ogration:	
Hagle Country Inc.	<u> </u>	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name	poration" or "incorporated" or the abbrev	iation "Corp " or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	ESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>		9 SEP 2
D. If amending the registered agent and/or registere new registered agent and/or the new registered of N/A	<u>fice address:</u>	e of the Control of t
Name of New Registered Agent:		3. 01
New Registered Office Address:	(Florida street addres	v)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	tered Agent: am familiar with and accept the obligations	of the position.
	Signature of New Registered Agent, if c	hanging

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	$\underline{V} = \underline{Mik}$	n Doe e Jones v Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add Remove				
2) Change Add Remove				19 SEP 2
3) Change Add Remove			 ;	27 M 9:36
4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove				

(attach additional sheets,	if necessary). (I	Be specific)				
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The date of each amendment(s) adoption:date this document was signed.				, if other than th
		-		
Effe	ective date <u>if appli</u>	able:(no more than 90 days after a	mendment file date)	
		ed in this block does not meet the applicable statu te on the Department of State's records.	tory filing requirements, this date will not	be listed as the
Ada	option of Amendm	nt(s) (<u>CHECK ONE</u>)		
	The amendment(s was/were sufficient	was/were adopted by the members and the numb for approval.	er of votes east for the amendment(s)	
	There are no mem adopted by the bo	pers or members entitled to vote on the amendment of directors.	nt(s). The amendment(s) was/were	
	Dated	9/24/2019		
	Signature	By the chairman or vice chairman of the board, phave not been selected, by an incorporator – if in	the hands of a receiver, trustee, or	_
		other court appointed fiduciary by that fiduciary Stephen K Coder)	
		(Typed or printed nar	ne of person signing)	
		Incorporator/Director		19
		(Title of p	person signing)	FILED SEP 27 AM 9:
			10 A	36