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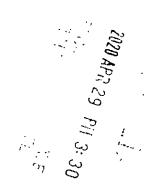
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	of Life Foundation,	Inc.			
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fo	ee are submitted for fi	ling.			
Please return all correspondence concerning	this matter to the foll	owing:			
Kimberly E. Kinsell, Esq.					
	(Name of C	Contact Person)			
LifeSouth Community Blood Centers, Inc.					
, -u. <u>s</u> .	(Firm/	Company)			
4039 Newberry Road					
·	(Ac	idress)			
Gainesville, FL 32607					
	(City/ State	and Zip Code)			
kekinsell@lifesouth.org					
E-mail address: (to be used for future a	nnual report no	Hification	n)	-
For further information concerning this matt	er, please call:				
Kimberly E. Kinsell		352 at		224-1637	
(Name of Conta	ct Person)		a Code)	(Daytime Teleph	none Number)
Enclosed is a check for the following amour	it made payable to the	Florida Depar	tment of	State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate o	f Status Certified	Copy al copy is	Certifi Certifi) Filing Fee icate of Status led Copy tional Copy is esed)	
Mailing Address Amendment Section		Street A	ddress	on	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Five Points of Life Foundation, Inc.

(Name of Corporation as currently filed with the Florida	a Dept. of State)	· <u></u> .
N09000011315		
(Document Nun	nber of Corporation (if know	vn)
Pursuant to the provisions of section 617,1006, Florida Stati amendment(s) to its Articles of Incorporation:	utes, this Florida Not For F	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
LifeSouth Community Foundation, Inc.		The new
name must he distinguishable and contain the word "corpor" "Company" or "Co." may not he used in the name.	ration" or "incorporated" o	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES.	\underline{S})	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		ter the name of the
N/A Name of New Registered Agent:		
Name of New Registerea Agent.		
	 (Florid	a street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am j		obligations of the position.
	Signature of New Registered	1 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)

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		2020 AFR
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	20
1) N/A Change Add				Pii 3: 30
Remove			-	
2) Change Add				
Remove 3) Remove Add Remove				
4) Change Add				
Remove				
5) Change Add				
Remove				
6) Change Add				<u></u>
Remove				
E. If amending or addin- (attach additional sheet		onal Articles, enter change(s) here: (ssary). (Be specific)		
Article I of the Articles of	Incorpor	ration is hereby amnded in its entirety to read as follo	ows:	
ARTICLE I Name of Cor	poration	Nonprofit Status		
The name of the Corporation is: LifeSouth Community Foundation, Inc., and it is organized under Chapter 617.				
Florida Statutes, as a corporation, not-for-protit.				

			100
		2020 BPC -	The Francisco
	- 	· * * * * * * * * * * * * * * * * * * *	PII 3: 30
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	· ·		
		<u> </u>	
			
	*	- 8 - 18	
			
			
		•	
The date of each amendment(s) adoption: date this document was signed.	September 26, 2019		, if other than the
date this document was signed.			
Effective date if applicable: (m	o more than 90 days after amendment file date)	1	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirer of State's records.	nents, this date wi	ll not be listed as the
Adoption 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.

	the board of directors. April 14, 2020	2020 AFR 2	·
	gnature Managed Care	- T	70 PH 3: 30
·	(By the chairman or vice chairman of the board, have not been selected, by an incorporator – if other court appointed fiduciary by that fiduciar	in the hands of a receiver, tru	
	Nancy Eckert		
	(Typed or printed na	ame of person signing)	
	President		

(Title of person signing)