1110000000505

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF COR	PORATION:	FOUNDAT	now FUL SOCIAL	CHANGE, IN
DOCUMENT N	U MBER:	N10000	DOO 505	
The enclosed Arti	cles of Amendmen	and fee are subn	nitted for filing.	
Please return all c	orrespondence cond	erning this matte	r to the following:	
	L	OU(SE /	M. Guldo Contact Person)	
	Foo	UNDATION (Firm/) FOR SOCIA (Company)	CHAMCE, INC
_		RIVERS	SIDE BLUD. S	
_	1	VON YOR	C, NY 10069	
		Guido 7	for future annual report notificat	
For further inform	ation concerning th	is matter, please	call:	
<u>Lou</u>	ISE M. G me of Contact Pers	U1)0	at (941) 54 (Area Code & Daytime	1.1435 e Telephone Number)
Enclosed is a chec	k for the following	amount made pay	yable to the Florida Department of	of State:
□ \$35 Filing Fee	© \$43.75 Fil Certificate of	ing Fee & Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai Di	ailing Address mendment Section ivision of Corporation O. Box 6327	ns	Street Address Amendment Section Division of Corporation Clifton Building	s

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

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SECRETARY UTSTATE FALLAHASSEE, FLORIDA

August 25, 2011

LOUISE M. GUIDO FOUNDATION FOR SOCIAL CHANGE, INC. 100 RIVERSIDE BLVD., SRE. 20H NEW YORK, NY 10069

SUBJECT: FOUNDATION FOR SOCIAL CHANGE, INC

Ref. Number: N10000000505

With THANK YW. We have received your document for FOUNDATION FOR SOCIAL CHANGE, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 211A00019943

Articles of Amendment

to

Articles of Incorporation	υu
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Foundation For Social Change (Name of Corporation as currently filed with the Florida Dept. of State)	, 1	nc
N 1000000505		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> at the following amendment(s) to its Articles of Incorporation:	ıdopts	;
A. If amending name, enter the new name of the corporation:		
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable:		2
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	i S	VISION TO SECOND
	[무-	を と と と に に に に に に に に に に に に に に に に
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	.7 AH 8: 08	RVIN SIAIL CORPORATIONS
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 registered office address:	2	
Name of New Registered Agent: LOUISE M. GUIDO		
New Registered Office Address: (Florida street address)	0	
SALA SOTA, Florida 3 4) (City) (Zip Code)	36	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations position.		
Signature of New Registered Agent, if changing		

Page 1 of 3

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Address **Title** <u>Name</u> **Type of Action** MUINI RICHALDSON ☐ Add (Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendmen	7/30/11
Effective date if applicable:	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(sere sufficient for approval.
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	7/30/11
Signature	Qui
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	LOUISE M. GUIDO
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)