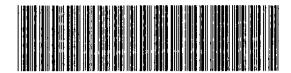
N10000008317

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900198107629

03/17/11--01018--031 **43.75

SECRETARY OF STATE BIVISION OF CORPCRATIONS

Amund CC Manualli

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: FRIENDS OF S	T CATHERINE INC	
DOCUMENT N	UMBER: N1000008317		
The enclosed Art	icles of Amendment and fee are subm	itted for filing.	
Please return all o	correspondence concerning this matter	to the following:	
_		OBINSON	,
	(Name of Co	ontact Person)	
	FRIENDS OF ST	CATHERINE INC	
_	(Firm/ C	Company)	
	PO BOX	X 541826	
	(Ad	dress)	
	LAKEWOR ⁻	TH, FL 33454	
		and Zip Code)	
		ofstcatherine.com	tion)
For further inform	nation concerning this matter, please ca	•	,
PAUL ROBINS	SON	_{at (} 954 ₎ 4957705	
(Na	ime of Contact Person)	··· ··· ··· ··· ··· ··· ··· ··· ··· ··	e Telephone Number)
Enclosed is a chec	ck for the following amount made pay-	able to the Florida Department	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	

Articles of Amendment to **Articles of Incorporation** of

FRIENDS OF ST CATHERINE INC

The South of the State of the S (Name of Corporation as currently filed with the Florida Dept. of State) N10000008317 (Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of Ir		r Profit Corporation adop
A. If amending name, enter the new name o	f the corporation:	
The new name must be distinguishable and cabbreviation "Corp." or "Inc." "Company" o		
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or registered agent and/or the new regis		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered position.		cept the obligations of ti
S	ignature 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	 		☐ Add ☐ Remove
			L Remove
(attach ad A) Said O		(Be specific) xclusively for charitable, religiou	
		ch purposes, the making of dist s under section 501 (c) (3) of the	
			e internal Neverlue Code
or corresp	onding section of any futu	re tederal tax code.	
B) Upon th	ne dissolution of the organ	nization, assets shall be distribut	ed for one or more
exempt pu	irposes within the meaning	g of section 501 (c) (3) of the In	ternal Revenue code,
or corresp	onding section of any futu	re federal tax code, or shall be	distributed to the federa
governme	nt, or to a state or local go	overnment, for a public purpose.	Any such assets not
disposed of	of shall be disposed of by	the Court of Common Pleas of	the county in which the
principal o	office of the organization is	then located, exclusively for su	ch purposes or to such
organizati	on, or organizations as sa	id Court shall determine, which	are organized operated
exclusive	ly for such purposes.		

The date of each amendment(s)	adoption: 20110310
.,	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) al.
There are no members or mer adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were fors.
Dated_201103	310
Signature	Paul A Robinson
have n	e chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, of court appointed fiduciary by that fiduciary)
	PAUL ROBINSON
	(Typed or printed name of person signing)
_	PRESIDENT
·	(Title of person signing)

Page 3 of 3