# W10000010158

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# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: THE BOX CAR TOUR FOUNDATION, INC.					
DOCUMENT NU	мвек: <u>N10000010158</u>		····		
The enclosed Article	es of Amendment and fee are sul	omitted for fi	iling.		
Please return all con	respondence concerning this mat	ter to the follow	lowing:		
	JOI	HN DAVIS			
	(Name of Contact Person)				
	JOHN DAVIS CPA PL				
	(Firm/ Company)				
28901 TRAILS EDGE BLVD. STE 205					
	(1	Address)			
	BONITA SP	RINGS, FL	_ 34134		
	(City/ State	te and Zip Co	ode)		
JDAVIS@JOHNDAVISCPA.COM  E-mail address: (to be used for future annual report notification)					
For further informat	ion concerning this matter, please	call:			
JOHN DAVIS		at ( 2	39 ) 444-59	45	
(Name	e of Contact Person)	(4	Area Code & Dayt	45 ime Telephone Number)	
Enclosed is a check	for the following amount made pa	ayable to the	Florida Departmen	nt of State:	
	☐ \$43.75 Filing Fee & Certificate of Status	Certified (Addition 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		Ā D C 2	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente Callahassee, FL 3230	er Circle	

### Articles of Amendment to Articles of Incorporation of

# THE BOX CAR FOUNDATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

## N0000010158

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

	<del></del>	
The new name must be distinguishable and contain t abbreviation "Corp." or "Inc." <mark>"Company" or "Co."</mark>		
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	ý	
		<del></del>
D. If amending the registered agent and/or registered new registered agent and/or the new registered on Name of New Registered Agent:		nter the name of the
New Registered Office Address:	(Florida street address)	
<del></del>	(City)	, Florida (Zip Code)
lew Registered Agent's Signature, if changing Regis hereby accept the appointment as registered agent. osition.		ept the obligations of th

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>	Name	Address	Type of Action
<del></del>			☐ Add ☐ Remove
<del></del>	<del></del>		☐ Add ☐ Remove
<u>-</u>			☐ Add ☐ Remove
	or adding additional Articles, enter chional sheets, if necessary). (Be specific,		
Said organiz	ation is organized exclusively for cl	haritable, religious, educatio	nal, and
scientific pur	poses, including, for such purposes	s, the making of distributions	s to
organizations	that qualify as exempt organization	ons under section 501 (c) (3)	of the Internal
Revenue Cod	de or corresponding section of any	future federal tax code.	
Upon the disc	solution of the organization, assets	shall be distributed for one	or more exempt
purposes with	nin the meaning of section 501 (c)	(3) of the Internal Revenue	Code, or
corresponding	g section of any future federal tax of	code, or shall be distributed	to the federal
government,	or to a state or local government, f	or a public purpose. Any su	ch assets not
disposed of s	hall be disposed of by the Court of	Common Pleas of the cour	nty in which
the principal of	office of the organization is then lo	cated, exclusively for such p	urposes or
to such organ	nization or organizations, as said C	ourt shall determine, which	are organized
and operated	exclusively for such purposes.	•	
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·····	···		

The date of each amendment(s) a	doption: 10/29/10
, ,	(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 ad was/were sufficient for approval	dopted by the members and the number of votes cast for the amendment(s) l.
There are no members or members adopted by the board of directo	bers entitled to vote on the amendment(s). The amendment(s) was/were rs.
	chairman or vice chairman of the board, president or other officer-if directors
	t been selected, by an incorporator – if in the hands of a receiver, trustee, o urt appointed fiduciary by that fiduciary)
	JACK NORTMAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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