

Florida Department of State
Division of Corporations
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
WATSON CHARITABLE FOUNDATION, INC.**

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3/18/2011 10:24:19 AM PAGE 1/001 Fax Server

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March 18, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

WATSON CHARITABLE FOUNDATION, INC.
6905 N. WICKHAM ROAD, SUITE 403
MELBOURNE, FL 32940

SUBJECT: WATSON CHARITABLE FOUNDATION, INC.
REF: N10000011930

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

FAX Aud. #: H11000070728
Letter Number: 811A00006656

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TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

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Articles of Amendment
to
Articles of Incorporation
of

Watson Charitable Foundation, Inc.

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

N10000011930

(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:

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:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

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 of the position.

Signature of New Registered Agent, if changing

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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>	<u>Address</u>	<u>Type of Action</u>
Dir	Christopher S. Watson	6905 N. Wickham Road Suite 403 Melbourne, FL 32940	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Dir	Steven T. Watson	6905 N. Wickham Road Suite 403 Melbourne, FL 32940	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Dir	Timothy F. McWilliams	6905 N. Wickham Road Suite 403 Melbourne, FL 32940	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

10

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The date of each amendment(s) adoption: 03/10/2011
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 03/10/2011

Signature _____

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Christopher S. Watson

(Typed or printed name of person signing)

President/Director

(Title of person signing)

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