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(Req	uestor's Name)	
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Amend. 4-19-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: CHRISTMAS FO	OR THE KIDS	OSCEOL	A INC
DOCUMENT N	UMBER: N11000002892			
The enclosed Arti	icles of Amendment and fee are submi	tted for filing.		
Please return all c	orrespondence concerning this matter	to the following:		
_	SALLY	SIBLEY		
	(Name of Co	ontact Person)		
-	(Firm/ C	Company)		
_	209 FARRINGTON LANE		FL 34744	
	,	iress)		
_		E, FL 34744 and Zip Code)		
_	SSIBLEY3@ E-mail address: (to be used for	CFL.RR.COM or future annual rep	ort notificatio	n)
For further inform	nation concerning this matter, please ca	all:		
SALLY SIBLE	Υ	at (407)	963-5138	Telephone Number)
	ame of Contact Person) ck for the following amount made pays	•	•	•
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing I Certified Copy (Additional copy enclosed)		
A D P	failing Address mendment Section livision of Corporations O. Box 6327 allahassee, FL 32314	Division o Clifton Bu	nt Section of Corporations	·

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CHRISTMAS FOR THE KIDS OSCEOLA, INC.

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

N1000002892

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Sthe following amendment(s) to its Articles of Incorporation. A. If amending name, enter the new name of the corporation.	ion:	Profit Corporation adopts
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co." n		ncorporated" or the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		14 PR 13
D. If amending the registered agent and/or registered new registered of		enter the name of the
Name of New Registered Agent:	net audress.	
New Registered Office Address:	(Florida street address)	<u> </u>
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. position.	tered Agent: I am familiar with and acc	cept the obligations of the
Signatura	of New Registered Agent if c	hanaina

Page 1 of 3

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
			
	<u> </u>		

	nding or adding additional Artic additional sheets, if necessary).		
add ART	ICLE IX: Upon dissolution of	this organization, assets shall	be distributed for one
or more	exempt purposes within the r	meaning of section 501(c)(3) of	the Internal
Revenue	Code, or corresponding sec	ction of any future federal tax co	ode, or shall
be distrib	outed to the federal governme	ent, or to a state or local govern	ment,
for a pub	lic purpose.		
replace /	ARTICLE III with: The organi	ization is organized exclusively	for charitable
		he Internal Revenue Code, or o	
	of any future federal tax code		
<u> </u>			
			

The date of each amendmen	t(s) adoption: March 21, 2011
Effective date <u>if applicable</u> :	(date of adoption is required) March 21, 2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Daved Mar	ch 21/2011
Signature/	Jammen James
(By	the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	Danny Quinn
	(Typed or printed name of person signing)
	President
	(Title of person signing)