## N11000005674

(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:	7				
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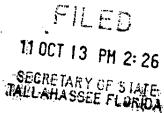
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- **300213161353** 10/13/11--01022--012 \*\*35.00

FILED
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Amerd Thewis 10-14-11

## Articles of Amendment to Articles of Incorporation of



Florida Foundation	for Cancer	Support, Inc.	rango
(Name of Corporation as curre	ntly filed with	the Florida Dept. of S	State)
N110	000005674		
(Document Num	ber of Corporati	ion (if known)	
Pursuant to the provisions of section 617.1006, It the following amendment(s) to its Articles of Inc.		this <i>Florida Not For</i>	Profit Corporation adopts
A. If amending name, enter the new name of	the corporatio	<u>n:</u>	
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" or			acorporated" or the
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET	new principal office address, if applicable: 1645 Metropolitan Blvd Ste 2 al office address MUST BE A STREET ADDRESS		n Blvd Ste 2
		Tallahassee, FL	32308
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			
D. If amending the registered agent and/or renew registered agent and/or the new regis			nter the name of the
Name of New Registered Agent:			
<u></u>	1645 Metr	opolitan Blvd Ste 2	<del></del> ,
New Registered Office Address:		da street address)	<u>-                                     </u>
	Tallahassee		, Florida 32308
-		(City)	(Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered			ent the obligations of the
position.	agom. rum,	,	op. me congunous of me
	ignature of New	Registered Agent, if co	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)

**Type of Action Title** <u>Address</u> Name. ☐ Add ☐ Remove \_ 🔲 Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s)	adoption: 09/30/2011
	(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 approva	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or men adopted by the board of directors	nbers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated 10/03/2	011
Signature	Jory Merowell
have no	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, or ourt appointed fiduciary by that fiduciary)
_	Tony McDowell
	(Typed or printed name of person signing)
_	Treasurer
	(Title of person signing)