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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ROBIN NABELE WAGMAN AGAINST ALL ODDS SCHOLARSHIP FOUNDATION, INC.

DOCUMENT NUMBER: 17053053312042 EIN 38-3850329

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT P. CURTIS

(Name of Contact Person)

AAO SCHOLARSHIP FOUNDATION, INC.

(Firm/ Company)

6750 CRESCENT WOODS CIRCLE

(Address)

LAKE LAND FL 33813

(City/ State and Zip Code)

lcurtis1943@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT P. CURTIS

(Name of Contact Person)

at 863 557 6143

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable 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 Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2024

ROBERT P CURTIS
6750 CRESCENT WOODS CIRCLE
LAKELAND, FL 33813

SUBJECT: ROBIN NABLE WAGMAN AGAINST ALL ODDS SCHOLARSHIP
FOUNDATION, INC.
Ref. Number: N11000007780

We have received your document for ROBIN NABLE WAGMAN AGAINST ALL ODDS SCHOLARSHIP FOUNDATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

- ✓ Missing first page ✓ select an adoption box check one.
- ✓ The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.
- ✓ 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) 245-6050.

SHANTELL BROWN
Regulatory Specialist II

Letter Number: 624A00013323

*To: Thank you!
Sorry for the
mistake on
my part.
Regards,
[Signature]*

RECEIVED
JUL 16 2024

Articles of Amendment
to
Articles of Incorporation
of

ROBIN NABLE WAGMAN AGAINST ALL ODDS SCHOLARSHIP FOUNDATION, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

(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:

AGAINST ALL ODDS SCHOLARSHIP FOUNDATION, INC. 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)

N/A

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

6750 CRESCENT WOODS CIRCLE
LAKE LAND FL 33813
33813

**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:

N/A

(Florida street address)

New Registered Office Address:

LAKE LAND
(City)

Florida 33813
(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.

N/A

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
-------------------------------	-------	------	---------

1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>D</u>	<u>RICHARD HORNBY</u>	<u>740 N. MAGNOLIA AVE</u> <u>ORLANDO FL 32803</u>
--	----------	-----------------------	---

☒ Remove

2) ☐ Change
☐ Add

☐ Remove
3) ☐ Change
☐ Add
☐ Remove

4) ☐ Change
☐ Add

☐ Remove

5) ☐ Change
☐ Add

☐ Remove

6) ☐ Change
☐ Add

☐ Remove

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

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

N/A

Lined area for text entry.

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TALLAHASSEE, FL

The date of each amendment(s) adoption: ~~1/1/24~~ ~~5/15/24~~, if other than the date this document was signed.

Effective date if applicable: ~~1/1/24~~
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

~~1/1/24~~ 5/15/24

Signature

~~1/1/24~~ Robert P. Curtis

(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)

5/15/24

ROBERT P. CURTIS

Robert P. Curtis

(Typed or printed name of person signing)

PRESIDENT/EXECUTIVE DIRECTOR

(Title of person signing)

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TALLAHASSEE, FL