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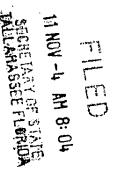
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| PICK-UP | → WAIT | ☐ MAIL |
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| Special Instructions | to Filing Officer: | , |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Fight Against | Children's Cancer, i | nc. |
|-----------------------------|--|--|---|
| DOCUMENT NUM | BER: N / / 0 | 0000 80 | 62 |
| The enclosed Articles | of Amendment and fee are sub | mitted for filing. | ` |
| Please return all corre | spondence concerning this matt | ter to the following: | |
| • | Michae | l Connolly Jr. | |
| | (Name of | Contact Person) | |
| | Fight Against C | hildren's Cancer, Inc. | |
| | (Firm | / Company) | |
| | | Fawn Lane | |
| | 4) | Address) | |
| | | east, FL 32137 | |
| | ` • | • , | |
| | | Dbellsouth.net I for future annual report no | otification) |
| For further informatio | n concerning this matter, please | e call: | |
| John Nakowicz, C | :PA | at (401) 780 | -9530 Daytime Telephone Number) |
| (Name | of Contact Person) | (Area Code & I | Daytime Telephone Number) |
| Enclosed is a check for | or the following amount made p | ayable to the Florida Depar | tment 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) |
| Amend Division P.O. E | ng Address dment Section on of Corporations Box 6327 assec, FL 32314 | Street Address Amendment Sec Division of Corp Clifton Building 2661 Executive of Tallahassee, FL | tion orations Center Circle |

FILED

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SEGRETARY OF STATE

TALLAHASSEE FLORIDA

Articles of Amendment to Articles of Incorporation of

| | | ancer, Inc. | <u></u> |
|---|-------------------------------------|---|---------------------------------------|
| (Name of Corporation as cur | rrently filed with | the Florida Dept. of S | <u>state</u>) |
| N11 | 0 00 00 | FOGA ion (if known) | |
| (Document N | umber of Corporat | ion (if known) | - |
| ursuant to the provisions of section 617.100 ne following amendment(s) to its Articles of | | , this <i>Florida Not For</i> | Profit Corporation adop |
| . If amending name, enter the new name | of the corporatio | <u>n:</u> | |
| he new name must be distinguishable and bbreviation "Corp." or "Inc." <u>"Company"</u> | contain the word or "Co." may no | "corporation" or "in the used in the name. | corporated" or the |
| . Enter new principal office address, if an Principal office address MUST BE A STRE | | •••• | · · · · · · · · · · · · · · · · · · · |
| | | | |
| | | | |
| . Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF | | | |
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| If any and the second second second second | | | |
| If amending the registered agent and/or new registered agent and/or the new reg | registered office add | address in Florida, ei Iress: | iter the name of the |
| Name of New Registered Agent: | | | |
| | | · | |
| New Registered Office Address: | (Flori | da street address) | |
| | | · | , Florida (Zip Code) |
| | | (City) | (Zip Code) |
| w Registered Agent's Signature, if chang sereby accept the appointment as registere sition. | | | ept the obligations of th |
| | Signature of No | Registered Agent, if ch | anaina |

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) **Title** Name <u>Address</u> Type of Action ☐ Add ☐ Remove ☐ Add Remove ☐ Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Additional article Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

| The date of each amendment(s) a | doption: October 27, 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 ad was/were sufficient for approval | lopted by the members and the number of votes cast for the amendment(s) |
| There are no members or members adopted by the board of director | pers entitled to vote on the amendment(s). The amendment(s) was/were rs. |
| Dated_October | 27, 2011 |
| Signature | Michael Connolly Tr. |
| have not | chairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, our appointed fiduciary by that fiduciary) |
| | Michael Connolly Jr. |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |