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(RM) 12-24-14

COVER LETTER

TO: Amendment Section **Division of Corporations** Special Olympics Florida Foundation DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sherry Wheelock (Name of Contact Person) Special Olympics Florida, Inc. (Firm/ Company) 1915 Don Wickham Drive (Address) Clermont, FL 34711 (City/ State and Zip Code) silviavega@sofl.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michelle Braxton (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy (Additional Copy is

Enclosed)

Articles of Amendment to Articles of Incorporation of

a adopts the fell

SOFL Champions Foundation, Inc.

OOI L OHAITIPIOHS 1 O	uridation, inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)	٠ <u>٠</u> ٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠
45-3340920	NILODODOBS	14 9
(Docu	ment Number of Corporation (if known)	2
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati	006, Florida Statutes, this <i>Florida Not For I</i> on:	Profit Corporation adopts the following
A. If amending name, enter the new name	me of the corporation:	
Special Olympics Flo	rida Foundation, Inc.	. Th
	the word "corporation" or "incorporated" the name.	The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, i (Principal office address MUST BE A ST		
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C	Nor registered office address in Florida, e	nter the name of the
new registered agent and/or the new		
Name of New Registered Agent:	Sherry Wheelock	
,	1915 Don Wickham D	rive
New Registered Office Address:	(Florida street address)	
	Clermont	, Florida 34711
	(City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	sanging Registered Agent: ered agent. I am familiar with and accept the same of the latter of the Registered Agent, if cha	

Page 1 of 4

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: X Change X Remove X Add	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Ar (attach additional sheets, if necessary).	(Be specific)
VA	
UI FF	
	·

The date	, if other than the	
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	_
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	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.	
	October 6, 2014	
	Signature They Whee lock	
	(By the chairman of vide 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)	
	Sherry Wheelock	
	(Typed or printed name of person signing) CEO	
	(Title of person signing)	