N11000 009 327

(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:

Office Use Only



700336313457

11/14/19--01010--001 **43.75

 $S = \frac{1}{2} \nabla e^{i \cdot k_1 \cdot k_2} + \epsilon$

DEC 1.2 2019

2919 NOY 14 PM 4: :



COVER LETTER

TO: Amendment Section Division of Corporations

	Prayers For Chioe			
NAME OF CORPORATION	ON:		<u> </u>	75.77
	N11000009327			
DOCUMENT NUMBER:				
The enclosed Articles of Am	endment and fee are subr	nitted for filing.		
Płease return all corresponde Julie Zulcosky	ence concerning this matte	er to the following:		
		(Name of Contact	Person)	
		(Firm/ Compa	ny)	
253 Meadow Beauty Terrace	e			
		(Address)		
Sanford Florida 32771				
	-	(City/ State and Zip	Code)	
BT516@LIVE.COM				
E	-mail address: (to be used	for future annual re	port notification	n)
For further information conc	erning this matter, please	call:		
Julie Zulcosky		£	(407)	923-2023
	(Name of Contact Person))	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida	Department of	State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee Teate of Status Ted Copy tional Copy is osed)
Mailing Address		<u>s</u>	treet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Prayers For Chloe, Inc.		
(Name of Corporation as current N11(XXXXX)9327	tly filed with the Florida Dept, of State)
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006. Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corporatio</i>	on adopts the following
A. If amending name, enter the new name of the corporation. Chloe Zee Foundation, Inc.	on:	
		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.		ion "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u> NA</u>	~3
(Trincipal office address <u>most bl. A STREET ADDRESS</u>)		7019
		70 YO
		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	-o : :
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Arm No.
		သို့ တိ
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac		the_
Name of New Registered Agent:	NA	
<u> </u>	(Florida street address)	
New Registered Office Address:	N/A Flo	
	(City) (2	Lip Code)
New Registered Agent's Signature, if changing Registered . I hereby accept the appointment as registered agent. I am fan		he position.
	N/A	
Si	gnature of New Registered Agent, if chan	ging

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A — ———————————————————————————————————	
Add			
Remove			
2) Change			
Add			•
Remove			<u></u>
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)			
Article III Purpose - To raise funds for families in need of financial assistance with children that have cancer and other life			
threatening illnesses. Annual Chloe Zee Scholarship Fund, and other non-profit organizations that help individuals			
and families struck by cancer and other life threatening diseases.			
, <u>a.</u> ,			
			

	e date of cach amendment(s) adopted this document was signed.	ion: _/0/10/2019	, if other than the
	ective date if applicable:		
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this block current's effective date on the Depart	does not meet the applicable statutory filing requiremement of State's records.	ents, this date will not be listed as the
Add	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were adop was/were sufficient for approval.	ed by the members and the number of votes cast for the	he amendment(s)
	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s): The amendmen	nt(s) was/were
	11/07/2019		
	Dated		
		Bulco ky_ Let vice chairman (i) the board, president or other offi	
		elected, by an incorporator – if in the hands of a recei- pinted fiduciary by that fiduciary)	ver, trustee, or
	Julie Zulcos	• •	
		(Typed or printed name of person signing)	
	СЕО		
		(Title of person signing)	