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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Nicole E.	Mas Foo	und	ation, Inc.		
DOCUMENT NUMBER: 45-361324	7				
The enclosed Articles of Amendment and fee are sub-	mitted for filing.				
Please return all correspondence concerning this matter to the following:					
Nicholas E. Christin					
	(Name of Contact	Person)			
Wicker, Smith, O'Hara, McCoy & Ford, P.A.					
	(Firm/ Compa	any)			
2800 Ponce de Leon Blvd., Suite 800					
	(Address)		·		
Coral Gables, FL 33134					
	(City/ State and Zi	ip Code)			
nchristin@wickersmith.com					
E-mail address: (to be used	for future annual r	report no	otification)		
For further information concerning this matter, please	call:				
Nicholas E. Christin	_{at} 30	15	448-3939		
(Name of Contact Person)			le & Daytime Telephone Number)		
Enclosed is a check for the following amount made pa	ayable to the Florida	a Depart	ment of State:		
\$35 Filing Fee \$\times \text{Certificate of Status}\$	□\$43.75 Filing Fe Certified Copy (Additional copy 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	, [Division Clifton E	nent Section of Corporations		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Nicole E. Mas Foundation, Inc.

(Name of Corporation as current	tly filed with the Florida Dept. of State)	
45-3613247		
(Doc	nument Number of Corporation (if known)	
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporate	1006, Florida Statutes, this <i>Florida Not For Profit Corporat</i> tion:	tion adopts the following
A. If amending name, enter the new na	ame of the corporation:	
name must be distinguishable and contair "Company" or "Co." may not be used in	n the word "corporation" or "incorporated" or the abbrevio	The new ation "Corp." or "Inc."
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST (</u>		
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida, enter the name of vegistered office address:	of the B 25
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	5 5
	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if chair is the second of the suppointment as registed the second of the second	hanging Registered Agent: ered agent. I am familiar with and accept the obligations of	f the position.
_	Signature of New Registered Agent, if changing	

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	<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>	Address
1) Change		_	<u> </u>
Add			
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)

Article III

a. The specific purpose for this corporation is: Support medical research and health care.
b. Said organization is organized exclusively for charitable, religious, educational and scientific purposes, including
for such purposes, the making of distributions to organizations that qualify as exempt organizations under
section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.
c. Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes
within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future
federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.
Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the
principal office of the organization is then located, exclusively for such purposes or to such organization or
organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.
•

The date of each amendment date this document was signed		if other than the
Effective data <u>if applicable</u> :	2/18/2014	
	(no more than 91) days after amendment file date)	
Adoption of Amendment(s)	(CHECK_ONE)	
The amendment(s) was/w was/were sufficient for ap	were adopted by the mombers and the number of votes cast for the amendment(s)	
There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated Fel	pruary 25, 2014	
Signature	la Edel Vell W-	_
have t	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
Maria I	E. del Valle Mus	
	(Typed or printed name of person signing)	
Preside	ent/Director	
	(Title of person signing)	

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