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COVER LETTER

TO: Amendment Section Division of Corporations CHAFFEE FAMILY FOUNDATION, INC. NAME OF CORPORATION: N12000001062 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HEATHER S. BIRMINGHAM (Name of Contact Person) GOODMAN BREEN & GIBBS (Firm/ Company) 3838 TAMIAMI TRAIL NORTH, SUITE 300 (Address) NAPLES, FLORIDA 34103 (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: HEATHER S. BIRMINGHAM 239 403-3000 (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

Articles of Amendment to Articles of Incorporation of



| (Name of Corporation as currently filed with the Florida Dept. of Sta N12000001062 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corpora amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Not Applicable name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevi "Company" or "Co," may not be used in the name. | |
|---|----------------------------|
| (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corpora amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Not Applicable name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevi | ution adopts the following |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corpora amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Not Applicable name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevi | ntion adopts the following |
| A. If amending name, enter the new name of the corporation: Not Applicable name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevi | ntion adopts the following |
| Not Applicable name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevi | |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevi | • |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevi "Company" or "Co," may not be used in the name. | The new |
| | iation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: Not Applicable | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| · · · · · · · · · · · · · · · · · · · | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Not Applicable | |
| | |
| D. If amending the registered agent and/or registered office address in Florida, enter the name new registered agent and/or the new registered office address: | of the |
| Name of New Registered Agent: Not Applicable | <u> </u> |
| | |
| (Florida street address: New Registered Office Address: |) |
| HEW RESIDERED Office Address. | • |
| | Florida |
| (City) | (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. |

Page 1 of 4

Signature of New Registered Agent, if changing

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.

| X Change X Remove X Add | <u>PT</u> <u>V</u> <u>SV</u> | John Do Mike Jo Sally Sr | ones | |
|-------------------------------|------------------------------------|--------------------------------|--------------------|--------------------------|
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Addres</u> s |
| 1) Change | DV | | CHARLES V. CHAFFEE | 109 CURACAO LANE |
| XX Add | | | | BONITA SPRINGS, FL 34134 |
| 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: | | Not Applicable | | |
|---|---------------|----------------|---|--|
| (attach additional sheets, if necessary). | (Be specific) | | | |
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Page 3 of 4

| The date of each amendment(s) adoption:late this document was signed. | , if other than the |
|---|---------------------------|
| Effective date <u>if applicable</u> : <u>U/A</u> (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 we document's effective date on the Department of State's records. | vill not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(was/were sufficient for approval. | (s) |
| 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 APRIL 1, 2016 | |
| Signature (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) | |
| KAREN CHAFFEE | |
| (Typed or printed name of person signing) | · |
| PRESIDENT | |
| (Title of person signing) | |