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(JUL) 10 2012 C. MUSTAIN

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOI	RATION: The Karen Ma	agnolia Roberts Law	rence Foundation Inc
	BER: N1200000188		
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	Leila Pineiro		
		Name of Contact Perso	n
		Firm/ Company	
,	3903 Dr. Martin L		
	Fort Myers, FL 3	Address 3906	
		City/ State and Zip Cod	e
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
Leila Pineiro		_{at (} 239	672-0288
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Ame Divis P.O.	ing Address Indment Section Identification of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 21, 2012

LEILA PINEIRO 3903 DR. MARTIN LUTHER KING BLVD. FORT MYERS, FL 33906

SUBJECT: THE KAREN MAGNOLIA ROBERTS LAWRENCE FOUNDATION

INC

Ref. Number: N12000001887

We have received your document for THE KAREN MAGNOLIA ROBERTS LAWRENCE FOUNDATION INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain Regulatory Specialist II

Letter Number: 812A00009826

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2012

LEILA PINEIRO 3903 DR. MARTIN LUTHER KING BLVD. SUITE J FORT MYERS, FL 33906

SUBJECT: THE KAREN MAGNOLIA ROBERTS LAWRENCE FOUNDATION

INC

Ref. Number: N12000001887

We have received your document for THE KAREN MAGNOLIA ROBERTS LAWRENCE FOUNDATION INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 812A00009826

Carol Mustain Regulatory Specialist II

www.sunbiz.org



June 8, 2012

LEILA PINEIRO 3903 DR. MARTIN LUTHER KING BLVD. SUITE J FORT MYERS, FL 33906

SUBJECT: THE KAREN MAGNOLIA ROBERTS LAWRENCE FOUNDATION

INC

Ref. Number: N12000001887

We have received your document for THE KAREN MAGNOLIA ROBERTS LAWRENCE FOUNDATION INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 812A00009826

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

The Karen Magnolia Roberts Lawren	ce Foundation, Inc
(Name of Corporation as currently filed with the Flor	ida Dept. of State)
N12000001887	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	o <u>n:</u>
	The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name	on" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
•	70
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	ST PH
	E E
•	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
new registered agent and/or the new registered dance ad	in in
Name of New Registered Agent:	Thiero
3903 Dr	- Martin Luther
New Registered Office Address: King JR	Florida street address)
TL MILL	11 73 all
(Cip)	Florida 7 3 3 (16)
(0.13)	(Elp Cont)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	
Signature of New Registe	ered Agent if changing
Signature of the Mogration	

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	VP	Jermaine Soares	2700 27th St SW Lehigh Acres, FL 33976
2) × Change Add Remove	Р	Leila Pineiro	2909 48th ST W Lehigh Acres, FL 33976
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: UZ/Z//ZU/Z			
Effective date if applicable:	02/27/2012 (no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.		
There are no members or adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.		
Dated <u>U</u>	2/24/12		
Signature	Leila Racio		
(By the	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)		
<u></u>	eila Pineiro		
•	(Typed or printed name of person signing)		
	tresident		
	(Title of person signing)		