## N12000003890

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Foundations for Fami ON:	ilies, Inc.	·	
	N12000003890			
DOCUMENT NUMBER:				
The enclosed Articles of Am	endment and fee are subn	nitted for filing.		
Please return all corresponde	ence concerning this matte	r to the following:		
Heather Angersoll				
		(Name of Contact Pe	rson)	
Foundations Christian Mont	essori Academy			
		(Firm/ Company	•	······································
4141 Desoto Road				
		(Address)		
Sarasota, FL 34235				
	-	(City/ State and Zip (	Code)	
hangersoll@foundationscma	ı.org			
Е	-mail address: (to be used	for future annual rep	ort notification	n)
For further information conc	erning this matter, please	call:		
Heather Angersoll		at	941	907-7078
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida [	Department of	State:
☐ \$35 Filing Fee	■\$43.75 Filing Fee & 1 Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif Certif (Addi	0 Filing Fee Teate of Status Ted Copy tional Copy is osed)
Mailing A	ddress	Str	eet 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



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

April 24, 2019

**HEATHER J. ANGERSOLL** 4141 DESOTA ROAD SARASOTA, FL 34235

SUBJECT: FOUNDATIONS FOR FAMILIES, INC.

Ref. Number: N12000003890

We have received your document for FOUNDATIONS FOR FAMILIES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P07000072529 - FOUNDATIONS CHRISTIAN MONTESSORI ACADEMY, INC.,

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.

Irene Albritton Regulatory Specialist II

Letter Number: 519A00008262

Delatachod | Corrected | Corrected Shank You o

## Articles of Amendment Articles of Incorporation

Foundations for Families, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N12000003890 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Foundations Christian Montessori Academy of Sarasota, Inc. The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A , Florida \_ (Zip Code) (City) 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.

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.

Example: X.Change X.Remove X.Add	PT John   V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add			
Remove			
3 ) Change	***************************************		
Remove			
4) Change Add			
Remove			<del></del>
5) Change Add			
Remove			
6) Change			
Add Remove			
KCIIIOYC			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
Article III The general nature of the purpose for which the Corporation is organized is to exist and operate solely for educational.				
a) operating, managing, and maintaining a Christian school;				
b) providing family support, services, and training to the local community				
147				
	· · · · · · · · · · · · · · · · · · ·			
	-			

Monday, May 6, 2019	
he date of each amendment(s) adoption:	, if other than the
ate this document was signed.	
Monday, May 6, 2019  Iffective date if applicable:	
(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 will ocument's effective date on the Department of State's records.	not be listed as the
doption of Amendment(s) (CHECK ONE)	
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.	
Dated Tuesday, May 7, 2019	
Signature Status lingusell.	
(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)	
Heather J. Angesoll	
(Typed or printed name of person signing)	
President	
(Title of person signing)	