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COVER LETTER

TO: Amendment Section Division of Corporations Codys Kids, Inc. N12000003970 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CARYN ATKINS (Name of Contact Person) CODYS KIDS, INC. (Firm/ Company) 17851 NW 19 STREET (Address) PEMBROKE PINES, FL 33029 (City/ State and Zip Code) ELEASHA@CODYSKIDS.ORG E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SHERRILL CROFT (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 Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Street Address **Mailing Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

The Same Same	129
2112 AUG 13 PM	
SECAL MARY L	. 31

CODYS KIDS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N12000003970

N/12000003970	T-NIASS -	
(Document Numb	er of Corporation (if known)	LURIE
ursuant to the provisions of section 617.1006, F. mendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For Profit Corporation adopts the fo	ollowin
. If amending name, enter the new name of t	ne corporation:	
۸À	3	The nev
ame must be distinguishable and contain the wo Company" or "Co." may not be used in the na	rd "corporation" or "incorporated" or the abbreviation "Corp." or ne.	"Inc."
Enter new principal office address, if appli	nahie NA	
Principal office address MUST BE A STREET		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	EBOX) NA	
hew registered agent and/or the new regist	ristered office address in Florida, enter the name of the	
NA	ared office address.	
Name of New Registered Agent: NA		
New Registered Office Address:	(Florida street address)	
Registered Office Address.		
	, Florida (City) (Zip Code)	
	(City) (Zip Code)	
ew Registered Agent's Signature, if changing		
hereby accept the appointment as registered ag	ent. I am familiar with and accept the obligations of the position.	
Signature	f New Registered Agent, if changing	

Page 1 of 4

	·
If a	mending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and
add	ress of each Officer and/or Director being added:
(Atto	ach additional sheets, if necessary)
`	
Plac	is a 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)	<u>Title</u>	<u>Name</u>		Address
Change Add Remove	<u> </u>	<u>NA</u>		
2) Change Add Remove				
Change Add Remove	, <u></u>		:	
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)

AMEND ARTICLE III AND RESTATE AS FOLLOWS:

ARTICLE III: The specific purpose for which this corporation is organized
to strive to continue to raise awareness of childhood cancer and the
devastation visited upon the child and their families as they struggle
to survive emotionally, physically and financially. Furthermore this
corporation is organized exclusively for charitable, educational and scientific
purposes, including, for such purposes as making distributions to other
organizations that qualify as exempt under section 501(c)(3) of the Internal
Revenue Code, or corresponding section of any future federal tax code. Upon
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 of local government, for a public purpose.
Any such assets not disposed as stated above shall be disposed of by a Court of
competent jurisdiction in the county in which the principal office of the organization
is then located, exclusively for such purposes or to such an organization or multiple
organizations, as said Court shall determine, which are organized and operated
exclusively for such purposes.

The date of each amendment(s) adoption: AUG 8, 2012 JUN 1, 2012

(no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) ☐ | The amendment(s) was/were adopted by the members and thenumber 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. AUG 8, 2012 Dated chairman of 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) ELEASHA L. HILLIARD (Typed or printed name of person signing) VICE PRESIDENT (Title of person signing)