

N120000054169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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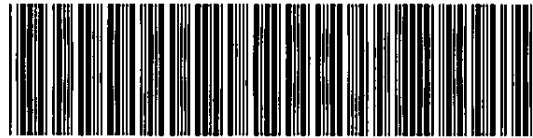
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 JUN 27 10 23 33

NC/And

JUL 02 2014

R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2014

PAUL R FINE
8057 CRANES POINTE WAY
WEST PALM BEACH, FL 33412

SUBJECT: IBIS CHARITIES, INC.
Ref. Number: N12000005469

We have received your document for IBIS CHARITIES, 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 is incomplete. Please find enclosed and complete the missing pages. Also, the hand writing in this form is illegible. Please either clearly print or type the information.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 314A00012801

*Thank you
Paul Fine*

RECEIVED
14 JUN 27 PM 4:14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: IBIS CHARITIES, INC

DOCUMENT NUMBER: N/2000005469

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAUL R. FINE

(Name of Contact Person)

(Firm/ Company)

8057 CRANES POINTE WAY

(Address)

WEST PALM BEACH FL 33412

(City/ State and Zip Code)

LEFTY 8057 @ 9MAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL FINE

(Name of Contact Person)

at (561) 691-5556

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

*Provisionally
Submitted*

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

FILED
14 JUN 27 PM 2:33
TALLAHASSEE, FLORIDA

IBIS CHARITIES, INC
(Name of Corporation as currently filed with the Florida Dept. of State)

N12000005469

(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:

IBIS CHARITIES FOUNDATION, 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.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

8057 CRANES POINTE WAY
WEST PALM BEACH, FL 33412

C. Enter new mailing address, if applicable:
(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:

PAUL R FINE
8057 CRANES POINTE
(Florida street address)

New Registered Office Address:

West Palm Beach, Florida 33412
(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.

Paul R Fine
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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|------------|-----------------------------|--|
| 1) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>D</u> | <u>STEPHEN S. LOGUIDICE</u> | <u>103 NATIVA CIRCLE</u>
<u>West Palm Beach, FL 33410</u> |
| 2) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>SD</u> | <u>BARBARA KOCH</u> | <u>7965 CRANES POINTE WAY</u>
<u>West Palm Beach FL 33412</u> |
| 3) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>P.D</u> | <u>PAUL R. FINE</u> | <u>8057 CRANES POINTE WAY</u>
<u>West Palm Beach FL 33412</u> |
| 4) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>ROSEANN NARDONI</u> | <u>7581 MONTE VERDE LANE</u>
<u>West Palm Beach, FL 33412</u> |
| 5) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>TD</u> | <u>LARRY SKATOFF</u> | <u>7549 HAWK'S LANDING DRIVE</u>
<u>West Palm Beach, FL 33412</u> |
| 6) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>John Hayes</u> | <u>10244 HERONWOOD LANE</u>
<u>West Palm Beach, FL 33412</u> |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A - NONE

The date of each amendment(s) adoption: MAY 19, 2014, if other than the date this document was signed.

Effective date if applicable: MAY 19, 2014
(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 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

JUNE 23, 2014

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)

PAUL R FINE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)