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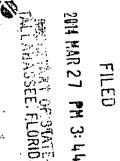
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: PETER J	MULRY FOU	NDATION, INC				
DOCUMENT NUMBER: N12000009	641					
The enclosed Articles of Amendment and fee are sub	mitted for filing.					
Please return all correspondence concerning this matter	er to the following:					
Peter Mulry						
	(Name of Contact Person	)				
PETER J MULRY FOUNDATION, INC						
	(Firm/ Company)	· · · · · · · · · · · · · · · · · · ·				
2401 Bayshore Dr Suite 1002						
	(Address)					
Tampa, FL 33624						
	(City/ State and Zip Code	2)				
pete@petermulry.com						
E-mail address: (to be used	I for future annual report i	notification)				
For further information concerning this matter, please						
Peter Mulry	at (850	,221-1045				
(Name of Contact Person)		(Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	rtment 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)				
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327	Amend Divisio	Address ment Section n of Corporations Building				

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**

FILED

## PETER J MULRY FOUNDATION, INC

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

N12000009641

THE THE TAR I OF STATE (Document Number of Corporation (if known) 20

ıg

name must be distinguishable and conto "Company" or "Co." may not be used		ition" or "incorporated" or the abbreviation "Corp." or	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>		2401 Bayshore Dr - Suite 1002	
		<sup>)</sup> Tampa. FL 33624	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2401 Bayshore Dr - Suite 1002	
		2701 Dayshore Dr - Suite 1002	
		Tampa, FL 33624	
(Mailing address MAY BE A POS)  1. If amending the registered agent new registered agent and/or the n	TOFFICE BOX)  Bind/or registered office a	Tampa, FL 33624	
(Mailing address MAY BE A POS)  D. If amending the registered agent	TOFFICE BOX)  and/or registered office and the registered office and t	Tampa, FL 33624	
Mailing address MAY BE A POS  D. If amending the registered agent new registered agent and/or the n	and/or registered office and/or registered office and/or registered office and	Tampa, FL 33624	
O. If amending the registered agent in new registered agent and/or the new Name of New Registered Agent	and/or registered office and/or registered office and/or registered office and	Tampa, FL 33624  ce address in Florida, enter the name of the address:  ore Dr - Suite 1002  (Florida street address)	
O. If amending the registered agent new registered agent and/or the n	end/or registered office and/or registered office and/or registered office and registere	Tampa, FL 33624  ce address in Florida, enter the name of the address:  ore Dr - Suite 1002  (Florida street address)  , Florida 33624	

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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD$ .

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	••••		
Add			
Remove			
2) Change	<del></del>		
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: (attach additional sheets, if necessary). (Be specific)					
Upon dissolution of the corporation, 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 or local government for					
a public purpose.					
<del>-                                    </del>					

	date of each amendment(s) adoption: March 18, 2014 this document was signed.	, if other than the
Effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Ado	option 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 March 18, 2014	
	Signature Place / Willy	
	(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)	***************************************
	Peter J. Mulry	
	(Typed or printed name of person signing)	
	Chairman	
	(Title of person signing)	