N/20000/08/0





90024225659

12/20/12--01025--013 ***85.60

Amna



DEC 21 2012 T. ROBERTS

COVER LETTER

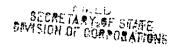
TO: Amendment Section Division of Corporations

NAME OF CORPORATION: IS PROOF FOUNDATION INC				
DOCUMENT NUMBER: N12000010	810			
The enclosed Articles of Amendment and fee are sub-	mitted for filing			
The enclosed Afficies of Amenament and fee are sub-	initied for timig.			
Please return all correspondence concerning this matte	er to the following:			
Frank F. Owen				
Trank I. Owen				
	(Name of Contact Person	1)		
21485 NW 27th Avenue				
	(Firm/ Company)			
21485 NW 27th Avenue	, Miami Gar	dens FI 33056		
	(Address)			
	(City/ State and Zip Cod	e)		
ffo@castlepalms.				
E-mail address: (to be used		notification)		
For further information concerning this matter, please	call:			
Frank F. Owen	_{at} 305	, 984-8915		
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made page	ayable to the Florida Depa	urtment 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		Address		
Amendment Section Division of Corporations		Iment Section		
P.O. Box 6327		on of Corporations Building		

Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



.12 DEC 20 PM 12: 27

IS PROOF FOUNDATION		
(Name of Corporation as currently file	ed with the Florida Dept. of	f State)
N12000010810		
(Document Nur	nber of Corporation (if know	vn)
ursuant to the provisions of section 617.1006, mendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florid</i>	la Not For Profit Corporation adopts the follo
. If amending name, enter the new name o	f the corporation:	
		The
ame must be distinguishable and contain the v Company" or "Co." may not be used in the i		orporated" or the abbreviation "Corp." or "I
-		
 Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u> 		
Enter new mailing address, if applicable	:	
(Mailing address MAY BE A POST OFFI		
		.
. If amending the registered agent and/or new registered agent and/or the new registered		Florida, enter the name of the
	istered office address.	
Name of New Registered Agent:		
	(Florida street a	uddhace)
iew Registered Office Address:	(Fibrida Siree) a	auress)
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changi	ing Dagistarad Agants	
hereby accept the appointment as registered a		nd accept the obligations of the position.
Sionatur	e of New Registered Agent.	if changing

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 X Remove X Add	<u>V</u> <u>Mil</u>	n Doe ke Jones ly Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address	
l) Change					
Add					
Remove					
2) Change					
Add					
Remove					
3) Change					
r 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)		
ARTICLE IX		
Special dissolution requirements		
Upon the dissolution of this 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 or local government, for a public purpose.		
· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption: Dec 19, 2012			
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) l.		
There are no members or membadopted by the board of directo	pers entitled to vote on the amendment(s). The amendment(s) was/were ors.		
Dated Dec 19	1, 2012 		
have not bee	man or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)		
Frank F. O	wen		
	(Typed or printed name of person signing)		
Director			
	(Title of person signing)		