

N13000003347

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

C. LEWIS  
OCT 14 2013  
EXAMINER

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: North Port for the Children

DOCUMENT NUMBER: N13000003347

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

Please return all correspondence concerning this matter to the following:

Mark J. Klingel, CPA

(Name of Contact Person)

Mark J. Klingel CPA, LLC

(Firm/ Company)

2567 N Toledo Blade BLVD #1

(Address)

North Port, FL 34289

(City/ State and Zip Code)

MJKlingel@aol.com

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

For further information concerning this matter, please call:

Mark J. Klingel

(Name of Contact Person)

at ( 941 ) 426-2267

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**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

APPROVED  
AND  
FILED  
13 OCT -7 PM 2:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

North Port for the Children, Inc.

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

N13000003347

(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:

*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)

2567 N Toledo Blade BLVD

#1

North Port, FL 34289

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 7185

North Port, FL 34287

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:

Mark J. Klingel, CPA

2567 N Toledo Blade BLVD #1

(Florida street address)

New Registered Office Address:

North Port

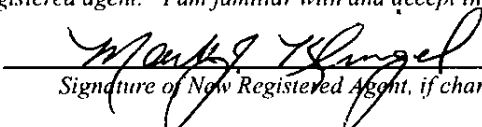
(City)

, Florida 34289

(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.

  
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> |

| <u>Type of Action</u><br>(Check One)   | <u>Title</u> | <u>Name</u>                 | <u>Address</u>  |
|--|--------------|-----------------------------|---|
| 1) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>C</u>     | <u>Dawn Jones</u>           | <u>2567 N Toledo Blade BLVD</u><br><u>#1</u><br><u>North Port, FL 34289</u> |
| 2) <input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>vc</u>    | <u>Sherry Berry</u>         | <u>2567 N Toledo Blade BLVD</u><br><u>#1</u><br><u>North Port, FL 34289</u> |
| 3) <input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>T</u>     | <u>Charlotte Leonard</u>    | <u>2567 N Toledo Blade BLVD</u><br><u>#1</u><br><u>North Port, FL 34289</u> |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>S</u>     | <u>Wendy B. Namack, CFP</u> | <u>2567 N Toledo Blade BLVD</u><br><u>#1</u><br><u>North Port, FL 34289</u> |
| 5) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>D</u>     | <u>Terri DiPietro</u>       | <u>2567 N Toledo Blade BLVD</u><br><u>#1</u><br><u>North Port, FL 34289</u> |
| 6) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>D</u>     | <u>Rich Cucchi</u>          | <u>2567 N Toledo Blade BLVD</u><br><u>#1</u><br><u>North Port, FL 34289</u> |

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

**ADD: Article VIII -- Dissolution**

Upon dissolution of the Corporation all assets remaining after payment of all costs and expenses of such dissolution shall be distributed to the Gulf Coast Community Foundation Scholarship Fund or, in the event that that organization no longer exists, to such other Florida Not-for-Profit Corporation or municipal, county or state agency which has qualified for exemption under Section 501(c)(3) or other pertinent sections of the Internal Revenue Code or any amendment thereof, as long as such agency serves the people of the same area as the North Port for the Children, Inc. None of the assets upon dissolution shall be distributed to any members of the Corporation.

**AMEND: Article III -- Purpose**

The purpose of this not-for-profit Corporation shall be to promote charitable contributions to support programs, projects and events that provide food, clothing, education or support to children's programs that have a direct positive impact enhancing the lives, health and well-being of North Port children in need.

APPROVED  
AND  
FILED

13 OCT -7 PM 2:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: July 15, 2013  
date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(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 Dawn Jones 10/1/13

Signature Dawn Jones  
(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)

Dawn Jones

(Typed or printed name of person signing)

Chairman of the Board of Directors

(Title of person signing)