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14 HAY 21 AH ID: 42 SECKETARY OF STATE FALL AHASSET, FLORID,

C. LEWIS
JUN # 2014
EXAMINER

COVER LETTER

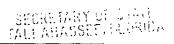
TO: Amendment Section Division of Corporations

Division of Corporations		
NAME OF CORPORATION: Clara's Secre	t Shepherds	s Foundation Corp.
DOCUMENT NUMBER: N13000068	393	
The enclosed Articles of Amendment and fee are submitte	d for filing.	
Please return all correspondence concerning this matter to	the following:	
Scott Schroeder		
(Na	me of Comact Person)	
E. Scott Schroeder, P. A	١.	
	(Firm/ Company)	
11000 Prosperity Farms	Road, S	uite 202
	(Address)	
Palm Beach Gardens, F		
(Cir	y/ State and Zip Code)
scottschroederlaw	/@amail.d	com
E-mail address: (to be used for		
For further information concerning this matter, please call	;	
Scott Schroeder	_{at (} 561	493-8000
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Depar	tment of State:
(,	43.75 Filing Fee & Pertified 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 Tallahassee, FL 32314	Division Clifton 2661 Ex	Address nent Section n of Corporations Building Accutive Center Circle Ssee, FL 32301

APPROPER AND FILED

Articles of Amendment to Articles of Incorporation

14 MAY 21 AM 10: 42



Clara's Secret Shepherds Foundation Corp.

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

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		v	v	v	v	v	v	v	u	v	u

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "h" "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) 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: New Registered Office Address: (Florida street address) New Registered Office Address: (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.	Pursuant to the provisions of section 617.100 amendment(s) to its Articles of Incorporation		Not For Profit Corporation adopts the follo
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "h "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) 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: New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	A. If amending name, enter the new name	of the corporation:	
"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) 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: (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:			The
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New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	•		
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:	(Florida strect ado	lress)
New Registered Agent's Signature, if changing Registered Agent:	·	3.600	, Florida
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		(City)	(Zip Code)
· · · · · · · · · · · · · · · · · · ·	New Registered Agent's Signature, if chan I hereby accept the appointment as registered	ging Registered Agent: d agent. I am familiar with and	accept the obligations of the position.
Signature of New Registered Agent, if changing	· · · · · · · · · · · · · · · · · · ·	Signature of New Project	if the second

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	Name		Address
1) Change				
Add				
Remove				
2)'Change		<u></u>		
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) he	iere	change(s) b	enter -	Articles,	additional	<u>or adding</u>	amending	<u>If</u>	E.
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(attach additional sheets, if necessary). (Be specific)

ARTICLE III

A charitable organization formed to enrich the lives of foster children in the state of Florida by soliciting
private contributions and the sponsorship of fund raising events to raise capital to be applied
to gifting those children and to benefit and enrich their lives.
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· · · · · · · · · · · · · · · · · · ·



The date of each amendment(s) add	option:		, if other than the
date this document was signed.	1	MAY 21 AM 10: 42	 -
Effective date if applicable:		. Orange to to the	
, -	(no more than 90 days after a	nendment file date) (1211).	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the numb.	er of votes cast for the amend	ment(s)
There are no members or member adopted by the board of director	ers entitled to vote on the amendments.	nt(s). The amendment(s) was	were
Dated	rch 13, 2014 h. Manun		
Signature on	h. H. Hanam		
(By the chairn	nan or vice chairman of the board, p		
	n selected, by an incorporator – if in ppointed fiduciary by that fiduciary)		e, or
	rah H. Marmion		
(Typed or printed name of person sig	gning)	
-	Yelsi don't		
	(Title of person signing)		