N15000008675

_____
(Requestor's Name)

_____
(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

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(10 3/5/15

COVER LETTER

TO: Amendment Section
    Division of Corporations

NAME OF CORPORATION: Anthony Fowler Foundation Inc

DOCUMENT NUMBER: N13000008675

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

Please return all correspondence concerning this matter to the following:

Gretchen Fowler

(Name of Contact Person)

(Firm/ Company)

11334 80th St E

(Address)

Parrish, FL 34219

(City/ State and Zip Code)

gretchen@affinc.org

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

For further information concerning this matter, please call:

Gretchen Fowler   at (941) 704-8883

(Name of Contact Person)   (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 &   ☐$43.75 Filing Fee &   ☐$52.50 Filing Fee
                 Certificate of Status   Certified Copy   Certificate of Status
                                 (Additional copy is   Certified Copy
                                 enclosed)   (Additional Copy is
                                                   Enclosed)

Mailing Address	**Street Address**
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Anthony Fowler Foundation, Inc.

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

N13000008675

(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:

N/A

_____*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: N/A
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
   (Mailing address MAY BE A POST OFFICE BOX)

PO Box 76

Parrish FL 34219

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: **N/A**

   _____
                          (Florida street address)
   New Registered Office Address:

   _____, Florida _____
                 (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.

_____
Signature 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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) **X** Change ____ Add ____ Remove	PS	Gretchen Fowler	11334 80th St E Parrish FL 34219
2) ____ Change ____ Add **X** Remove	S	Kathie Pier	34125 Amici St Temecula CA 92592
3) ____ Change **X** Add ____ Remove	D	Deanna Mack	11334 80th ST E Parrish FL 34219
4) ____ Change **X** Add ____ Remove	V	Freddie Fowler	11334 80th ST E Parrish FL 34219
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)

Amendment to the Mission: The mission of the Anthony Fowler Foundation Inc. has been re-established.

The new mission is in line with our true beliefs of the foundation and memory of Anthony Fowler.

Anthony Fowler Foundation Inc. will provide needed financial assistance, emotional support, education and resources to

families who have a child up to age 19 years experiencing an unforeseen tragedy leaving him or her hospitalized

in intensive care. We will help by off-setting some of their expenses so they can remain by their child's side during the

hospital stay. We may also help with funeral arrangements, negotiate rates and offset some costs related to the funerals. Funds

will be disbursed to a family who can demonstrate a financial need as set forth in the established board directed guidelines.

We are also setting up a website, free to all to provide the resources and education needed for these families.
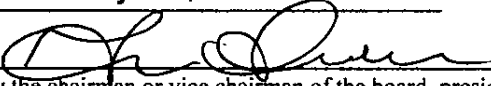
The date of each amendment(s) adoption: **March 19, 2014** _____, if other than the
date this document was signed.

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 **February 23, 2015** _____

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)

Gretchen Fowler
_____
(Typed or printed name of person signing)

President
_____
(Title of person signing)