N14000001076

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(Cit	y/State/Zip/Phone	÷#)
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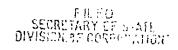
TO: Amendment Section Division of Corporations

NAME OF CORPORATIO		RISING COLLECTIV	'E FOUNDA'	ΓΙΟΝ, INC.
DOCUMENT NUMBER: _	N14000001076			
The enclosed Articles of Ame		itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
		BRIDGETT PARRIS		
	(Name of Contact Perso	n)	
	NATIONAL	CERVIVOR FOUNDA	ATION, INC.	
		(Firm/ Company)		
		515 E Las Olas Blvd	Suite #120	
		(Address)		
	F	ort Lauderdale, FL 333	01	
	(1	City/ State and Zip Cod	le)	
	bapa	arris@cervivorfoundati	on.org	
E	-mail address: (to be used t	for future annual report	notification)	· · · · · · · · · · · · · · · · · · ·
For further information conc	erning this matter, please c	all:		
	Bridgett Parris	at	954	839-6561
<u> </u>	(Name of Contact Person)		rea Code) , (Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida Dep	artment of Sta	ate:
□ \$35 Filing Fee	■\$43.75 Filing Fec & C Certificate of Status	3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certified	nte of Status I Copy anal Copy is
<u>Mailing A</u>	Address	Street	Address	•

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



15 DEC 31 PH 12: 36

GIRLS RISING COLLECTIVE FOUNDATION, INC.

(Name of Corporation as current)	y filed with the Flor	da Dept. of State)
N1400	00001076	
(Document Numbe	r of Corporation (if kr	own)
cursuant to the provisions of section 617.1006, Florida Statutes mendment(s) to its Articles of Incorporation:	, this <i>Florida Not Fo</i>	Profit Corporation adopts the following
a. If amending name, enter the new name of the corporation	on:	
KINDAH FOUNDATIO	ON, INC.	The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
, <u> </u>	٠,	
 If amending the registered agent and/or registered office new registered agent and/or the new registered office ac 		enter the name of the
Name of New Registered Agent:		
	(F)	orida street address)
New Registered Office Address:	,	,
		, Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept	the obligations of the position.
	CMP	tourd Assert if allowed as
Nt.	gnature of New Kegis	tered 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: 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>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			,
3) Change			
Add			
Remove			
4) Change			
Add	٠		
Remove			
5) Change			
Add			
Remove			
6) Change .			
Add			
Remove			

uttach additional sheets, if necessary	Articles, enter change(s) here: y). (Be specific)	
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The date of each amendment(s) adoption: date this document was signed.	_, if other than the
Effective date if applicable: San uary 2016 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	e listed as the
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.	
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) Bridgett Parts (Typed or printed name of person signing)	SECUL PHIZ: 36
President & CEO (Title of person signing)	