N14000003551

| (Re | equestor's Name) | |
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| (Ac | ddress) | |
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| (Ci | ty/State/Zip/Phone #) | |
| PICK-UP | WAIT | MAIL |
| (Bu | usiness Entity Name) | |
| (Document Number) | | |
| Certified Copies | Certificates of | Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Christmas House Charities, Inc. | | | | |
|--|--|--|--|--|
| DOCUMENT NUMBER: N1400003 | 551 | | | |
| The enclosed Articles of Amendment and fee are subn | nitted for filing. | | | |
| Please return all correspondence concerning this matte | r to the following: | | | |
| Adam Fetterman | | | | |
| | (Name of Contact Person |) | | |
| The Fetterman Firm, PLI | LC | | | |
| | (Firm/ Company) | | | |
| 10380 SW Village Center Dr., #328 | | | | |
| | (Address) | | | |
| Port St. Lucie, FL 34987 | | | | |
| | (City/ State and Zip Code | 2) | | |
| christmashousech | narities@ou | tlook com | | |
| E-mail address: (to be used | _ | | | |
| For further information concerning this matter, please | call: | | | |
| Adam Fetterman | ,772 | | | |
| (Name of Contact Person) | (Area Co | de & Daytime Telephone Number) | | |
| Enclosed is a check for the following amount made pa | yable to the Florida Depa | rtment of State: | | |
| \$35 Filing Fee \$\Bigcup \\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amend Divisio Clifton 2661 E. | Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301 | | |

Articles of Amendment to Articles of Incorporation



Christmas House Charities, Inc.

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

N14000003551

(Document Number of Corporation (if known)

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| A. If amending name, enter the new name of the corpor | |
|--|--|
| ame must be distinguishable and contain the word "corpoi Company" or "Co." may not be used in the name. | ration" or "incorporated" or the abbreviation "Corp." or |
| B. Enter new principal office address, if applicable: | 716 SE Walters Terr. |
| Principal office address <u>MUST BE A STREET ADDRES</u> | Port St. Lucie, FL 34983 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | P.O. Box 7456 |
| (| Port St. Lucie, FL 34985 |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent: | |
| | (Florida street address) |
| New Registered Office Address: | |
| | , Florida |
| New Registered Office Address: (Cit | |
| | (Zip Code) ed Agent: |

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) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | _ | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| 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) here: (attach additional sheets, if necessary). (Be specific) | | | | |
|---|--|--|--|--|
| (attach additional sheets, if necessary). (Be specific) | | | | |
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| The date of each amendment(s) adoption: | , 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 6/25/2014 | |
| Signature | |
| (By the chair can 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 applointed fiduciary by that fiduciary) | |
| J.W. Salveson | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |