N14000006141

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Coopied Instructions to Siling Office |
| Special Instructions to Filing Officer: |
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C.L. 15

COVER LETTER

TO: Amendment Section · Division of Corporations

| NAME OF CORPORATION: Ryan Nec | ce Foundatio | n, Inc. |
|--|--|--|
| DOCUMENT NUMBER: N1400006 | 141 | |
| The enclosed Articles of Amendment and fee are sub | mitted for filing. | |
| Please return all correspondence concerning this mate | er to the following: | |
| Allison Gorrell | | |
| | (Name of Contact Person | 1) |
| Ryan Nece Foundation, I | nc. | |
| | (Firm/ Company) | |
| 4401 W. Kennedy Blvd. 7 | Third Floor | |
| | (Address) | |
| Tampa, Florida 33609 | | |
| | (City/ State and Zip Code | e) |
| allison@ryannece | foundation.c | om |
| E-mail address: (to be used | for future annual report | notification) |
| For further information concerning this matter, please | call: | |
| Allison Gorrell | _{at (} 813 | ,785-9249 |
| (Name of Contact Person) | | ode & Daytime Telephone Number) |
| Enclosed is a check for the following amount made pa | ayable to the Florida Depa | rtment of State: |
| ■ \$35 Filing Fee | □\$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 of



| D. C. Marco Ed. (1989) | of | 15 MAR -2 | PM 2: 41 |
|---|--|--------------------------|--------------|
| Ryan Nece Foundation, Inc. | | 13 (17) | |
| (Name of Corporation as currently filed with the | e Florida Dept. of State) | | |
| N14000006141 | | | |
| (Document Number of | of Corporation (if known) | | |
| Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation: | atutes, this <i>Florida Not For Pro</i> | fit Corporation adopts t | he following |
| A. If amending name, enter the new name of the corpo | oration: | | |
| N/A | | | The new |
| name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name. | poration" or "incorporated" or | the abbreviation "Corp. | |
| B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u> | N/A | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | | _ _ _ |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered offi | office address in Florida, enter ice address: | the name of the | _ |
| Name of New Registered Agent: N/A | | | |
| | (Florida street address) | | |
| New Registered Office Address: | | | |
| New Registered Office Address: | | , Florida | |

Page 1 of 4

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: \underline{X} Change \underline{X} Remove \underline{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> | | Address |
| l) Change | | N/A | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | <u> </u> | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | - | | |
| Add | | | | |
| Remove | | | | |
| 1) Change | | | | |
| Add | , | | | |
| Remove | | | | |
| | | | | |
| 5) Change | | <u> </u> | | |
| Add | | | | |
| Remove | | | | |
| n Change | | | | |
| Add | | | - | |
| Remove | | | | |

| (attach additional sheets, if necessary). (Be specific) |
|--|
| Article III |
| |
| The organization is organized exclusively for charitable, religious, |
| educational, and scientific purposes under section 501(c)(3) of the |
| Internal Revenue Code, or corresponding section of any future |
| federal tax code. |
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| The date of each amendment(s) adopti | on: | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | , if other than the |
|--|---|---------------------------------------|---------------------|
| date this document was signed. | € | SELFE MARY OF CORPORATIONS | |
| Effective date if applicable: | (no more than 90 days after amen | nu 2: lili | |
| | (no more man so days direct dimen | angeniyae date) | |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| The amendment(s) was/were adopte was/were sufficient for approval. | ed by the members and the number of | f votes cast for the amendment(s) | |
| There are no members or members adopted by the board of directors. | entitled to vote on the amendment(s) | . The amendment(s) was/were | |
| Dated 2/26// | 5 | | |
| Signature | on 19 | | |
| have not been se | or vice chairman of the board, presidented, by an incorporator – if in the inted fiduciary by that fiduciary) | | |
| Allison Gorrel | <u>.</u> | | |
| (Тут | oed or printed name of person signin | g) | |
| Executive Dire | ector | | |
| | (Title of person signing) | | |