N14000009402

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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SECRETARY OF STATE

APR 0 1 2015

C. CARROTHERS

Articles of Amendment to Articles of Incorporation of

GAL7 Foundation, Inc. (Name of Corporation as current	lu Glad with the El	ovida Dant of State)	
N1400009402	iy med with the Fi	orian Dept. of State)	
	ument Number of C	Corporation (if known)	
Pursuant to the provisions of section 617. Immendment(s) to its Articles of Incorporate		es, this <i>Florida Not For Profit Corp</i> o	ration adopts the folio
A. If amending name, enter the new na N/A	me of the corpora	tion:	The
name must be distinguishable and contain 'Company" or "Co." may not be used in		ation" or "incorporated" or the abbre	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>		GAL7 Foundation, Inc.	C.
		1) 10 Westbrook Lane	
		Palm Coast, FL 3210	64
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		GAL7 Foundation, Inc.	
		10 Westbrook Lane	
		Palm Coast, FL 3216	34
If amending the registered agent an new registered agent and/or the new			ne of the
Name of New Registered Agent:	Beverly B.	Naylor	
	10 Westbrook Lane		•
New Registered Office Address:		(Florida street address)	•
	Palm Coas	st, Florida	32164
	(City)		(Zip Code)
New Registered Agent's Signature, if cl hercby accept the appointment as registed			s of the position.
	Signature of New	Registered Agent, if changing	

Page 1 of 4

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GAL7 FO	undation, In	C.		
DOCUMENT NUMBER: N1400009	9402			
The enclosed Articles of Amendment and fee are sub	mitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
Beverly B. Naylor				
	(Name of Contact Person	n)		
GAL7 Foundation, Inc.				
	(Firm/ Company)			
10 Westbrook Lane				
	(Address)			
Palm Coast, Florida 321	64			
	(City/ State and Zip Cod	e)		
bevnaylor1@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please	call:			
Beverly B. Naylor	at (386	283-4248		
(Name of Contact Person)		ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	ertment of State:		
\$35 Filing Fee \$\text{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		Address ment Section		
Division of Corporations P.O. Box 6327		n of Corporations Building		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassec, FL 32301

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>Doe</u> <u>Jones</u> Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	Znd VP	PETER BERMAN	120 WATERTHRUSH CT DAYTOWA BEACH FL 32112
2) Change	ISTUP	Bererly B. Naylox	10 Westbrook Lane Pahn Coast, 71 32164
Remove 3) Change Add		n/a	
Remove 4) Change Add Remove		n/a	
5) Change Add		n/a	
6) Change Add		n/a	
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
N/A				
				
······································		·		
				 _
				
				
	<u></u>			
				
		~ / · · · · · · · · · · · · · · · · · ·	 	
				
				
				

l'he date	date of each amendment this document was signed	t(s) adoption: January 16, 2015	, if other than the
Effective date if applicable: upon filing			
		(no more than 90 days after amendment file date)	
4da	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	Dated Jar Signature	aren 1 Taker	
	(By the have r	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Karen	E. Finder	
		(Typed or printed name of person signing)	
	Preside	ent of the Board of Directors	
		(Title of person signing)	