## Florida Department of State

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. WHITE

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN HENRY AND CHERYL STERN "WE CARE, WE'RE THERE" COLORE

Certificate of Status	0
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Corporate Filing Menu

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TO: Amendment Section

## **COVER LETTER**

		/E CARE, WE'RE THERE" MENT FUND, INC.
DOCUMENT NUMBER: N15000002	279	
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Imeld	a Vasquez	
	Name of Contact Person	n)
Legalzo	om.com, Inc.	
	(Firm/ Company)	
100 W. Bro	adway Suite 100	
	(Address)	
Glenda	le, CA 91210	
	City/ State and Zip Cod	<b>c</b> )
chez885@aol.com		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please of	all:	
Imelda Vasquez	323	962-8600
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	rable to the Florida Depa	artment of State:
S35 Filing Fee S43.75 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 Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

FILED

	Articles of Amendment	15 FEB 12	# 10: 14
	to Articles of Incorporation		O STATE
	of	ANLI AHABSE	
HENRY AND CHERYL STERN "WE CARE, W	/E'RE THERE" COLORECTAL CA	NCÉR TREATMENT	FUND, INC.
(Name of Corporation as currently filed	d with the Florida Dept. of State)		
N15000000279			
(Document	Number of Corporation (if known)		
Pursuant to the provisions of section 617.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florida Not I</i>	For Profit Corporati	ion adopts the follow
A. If amending name, enter the new name of	the corporation:		
			The n
name must he distinguishable and contain the w		ed" or the abbrevia	tion "Corp." or "Inc
"Company" or "Co." may not be used in the n	ame.		
B. Enter new principal office address, if appl	licable:		
Principal office address <u>MUST BE A STREE</u>	T ADDRESS )		
	-		
C. Enter new mailing address, if applicable:	<u>.</u>		
(Mailing address MAY BE A POST OFFIC	CE BOX)		<del></del>
D. If amending the registered agent and/or r	egistered office address in Florid	a, enter the name o	f the
new registered agent and/or the new regis	stered office address:		
Name of New Registered Agent:			
	(Florida street address)		
New Registered Office Address:			
		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing	ng Registered Agent:		
l hereby accept the appointment as registered a		pt the obligations of	the position.
Sign	nature of New Registered Agent, if	changing	

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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> Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D	Everett A. Stern, MBA	12825 Buckland Street
Add			Wellington, FL 33414
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			<u></u>
Remove			
4) Change	*****		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	, <b>3</b>	ticles, enter ch (Be specific)			
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				-	
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<del></del>			<del> </del>		
			<u></u>		
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		•			

The date	, if other than the		
Effe	ctive date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
		The more man an east sites sites attended the fitted	
Add	ption of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were a was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) at.	
	There are no members or mem adopted by the board of direct		
	Dated 02/10	0/2015	
	Signature	rman or vice chairman of the board, president or other officer-if directors	
		(Typed or printed name of person signing)	
	President		
	<del></del>	(Title of person signing)	