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TALLAHASSEE, FLORIE

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AUG 10 2015

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON:	RITABLE FOUND	ATION, INC.	
DOCUMENT NUMBER:	N15000001258			
The enclosed Articles of An				
Please return all correspond	ence concerning this matter	to the following:		
JAMES M. STUCKEY				
47/44/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4		(Name of Contact Po	erson)	
ATTORNEY.AT LAW				
		(Firm/ Company	·)	
PO BOX 1800				
		(Address)	***************************************	
STUART, FLORIDA 3499	5.			
	(City/ State and Zip (Code)	
GPROCTOR@PCC-CPA.C				
	-mail address; (to be used	for future annual rep	ort notification)
For further information conc	erning this matter, please c	all:		
JAMES M. STUCKEY		at	772	
	(Name of Contact Person)	, <u></u>	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	oflowing amount made pay	able to the Florida D	Department of S	State:
₩ \$35 Filing Fee	□\$43.75 Filing Fee & C Certificate of Status		Certifi Certifi	Filing Fee case of Status ed Copy is conal Copy is sed)
Mailing A	ddress	Str	eet 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

FIFEL

15 AUG -7 AH 8: 26 of WE ARE LIFE CHARITABLE FOUNDATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) ASSEE, FLORIDA N15000001258 (Document Number of Corporation (if known) Pursuant to the provisions of section 617:1006, Florida Statutes, this Florida Not For Prafit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation; name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida strvei address) New Registered Office Address: Florida _ (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am faiiilliar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officer's 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, tist 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 vorporation, 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			
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			Control of the contro
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)				
THE PURPOSE OF THE CORPORATION IS AMENDED BY DELETING THE PURPOSE STATED IN THE				
ORIGINAL ARTICLES OF INCORPORATION AND SUBSTITUTING THE FOLLOWING:				
THIS CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL,				
AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO				
ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATONS DESCRIBED UNDER SECTION 501(c)(3)				
OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDEARL TAX CODE.				

The	: date of each amendment(s) adoption:	if other than the
date	this document was signed.	, ,	
Eff	ective date if applicable:		
		(no more than 90 days after amendment file date)	
		s block does not meet the applicable statutory filing requirements, this date will no e Department of State's records.	t be listed as the
Adı	ption of Amendment(s)	(CHECK ONE)	
Image: control of the	The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes east for the amendment(s) proval.	
	There are no members or radopted by the board of di	nembers entitled to yote on the amendment(s). The amendment(s) was/were rectors.	
	Dated. AUGU	ST 4, 2015	
	Signature	Gordon Prost	····
	have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator—if in the hands of a receiver, trustee, or part appointed fiduciary by that fiduciary)	
	GOI	RDON O. PROCTOR	
	·······	(Typed or printed name of person signing)	
	COF	PORATE SECRETARY	
		(Title of person signing)	