

N15000005891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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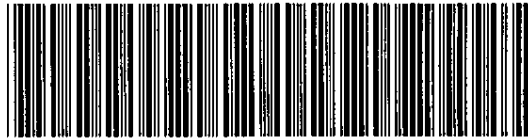
(Business Entity Name)

(Document Number)

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Amend

07/28/15--01015--017 **43.75

FILED
2015 JUL 28 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 30 2015
A RAMSEY

COVER LETTER

**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: _____ **Cranking It For Crohn's, Incorporated**

DOCUMENT NUMBER: _____ **N1500005891**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

David M. Friedberg

(Name of Contact Person)

_____ Cranking It For Crohn's, Incorporated

(Firm/ Company)

_____ 14422 Lake Underhill Road

(Address)

_____ Orlando, FL 32828

(City/ State and Zip Code)

CrankingItForCrohns@Hotmail.Com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David M. Friedberg at _____ (407)-951-1435

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee

Certificate of Status Certified Copy Certificate of Status

(Additional copy is Certified Copy
enclosed) (Additional Copy is
Enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Cranking It For Crohn's, Incorporated

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

FILED

N15000005891

(Document Number of Corporation (if known))

2015 JUL 28 PM 1:32

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

NOT APPLICABLE

The new

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:

NOT APPLICABLE

(Principal office address MUST BE A STREET ADDRESS)

NOT APPLICABLE

NOT APPLICABLE

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NOT APPLICABLE

NOT APPLICABLE

NOT APPLICABLE

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:

NOT APPLICABLE

New Registered Office Address:

(Florida street address)

NOT APPLICABLE, Florida

NOT APPLICABLE

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

NOT APPLICABLE

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
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1) <input type="checkbox"/> Change	<u>VP</u>	<u>Donald K Brown</u>	<u>5503 Forest Ridge Court, Indianapolis In 46203</u>
<input type="checkbox"/> Add			

☒ **Remove** - Mr. Donald Brown has resigned as VP and is being replaced by Maridic Pontevedra Friedberg, V.P.

2) <input type="checkbox"/> Change	<u>VP</u>	<u>Lawrence Ruiz</u>	<u>2593 Corbyton Court, Orlando, Fl. 32828</u>
<input type="checkbox"/> Add			

☒ **Remove** - Mr. Lawrence Ruiz has resigned as VP and is being replaced by Scott B. Friedberg, V.P.

3) <input type="checkbox"/> Change	<u>VP</u>	<u>Maridic Pontevedra Friedberg</u>	<u>14422 Lake Underhill Road, Orlando Fl., 32828</u>
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			

4) <input type="checkbox"/> Change	<u>VP</u>	<u>Scott B. Friedberg</u>	<u>14422 Lake Underhill Road, Orlando Fl., 32828</u>
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			

5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

NOT APPLICABLE

The date of each amendment(s) adoption: 7-17-15
, if other than the date this document was signed.

Effective date if applicable: Not Applicable
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 _____

Signature _____

(By the chairman 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 appointed fiduciary by that fiduciary)

David M. Friedberg
(Typed or printed name of person signing) David M. Friedberg
July 18, 2015

President, Cranking It For Crohns, Incorporated

(Title of person signing)