## N1500006786

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## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations

NAME OF CORPORATION: Dwayne Hav	e a Heart Foundat	tion, Inc.			
DOCUMENT NUMBER: N15000006786					
The enclosed Articles of Amendment and fee	are submitted for	filing.			
Please return all correspondence concerning th	nis matter to the fo	llowing:			
lan G. Bacheikov, Esq.					
	(Name of	Contact Person)			
Law Office of Ian G. Bacheikov, P.A.					
	(Fi <b>r</b> n	n/ Company)			
945 Pennsylvania Avenue, 1st Floor					
	(.	Address)			
Miami Beach, Florida 33139					
	(City/ Sta	ite and Zip Code)			
ian@bacheikov.com					
E-mail address: (to	be used for future	e annual report no	otification	)	
For further information concerning this matter	, please call:				
Ian Bacheikov		(305 at	5)	249-8000	
(Name of Contac	t Person)	(Are	a Code)	(Daytime Telephone Nu	nber)
Enclosed is a check for the following amount	made payable to t	he Florida Depar	iment of S	State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of		ed Copy ional copy is	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		Street A	.ddress		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment , to , Articles of Incorporation of

0

Dwayne Have a Heart Foundation, Inc.						
(Name of Corporation	as current	tly filed with the	Florida Dept. of	State)		
N15000006786						
(Docum	nent Numb	er of Corporation	(if known)			
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Na</i>	ot For Profit Corp	oration adopts the	following	
A. If amending name, enter the new name of the	<u>corporati</u>	ion:			The new	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorpo	rated" or the abb	reviation "Corp."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		945 Pennsylvani	a Avenue			
		1st Floor				
		Miami Beach, F	lorida 33139	·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		945 Pennsylvania Avenue				
		1st Floor				
		Miami Beach, I	Florida 33139		끍	3:
D. If amending the registered agent and/or reginew registered agent and/or the new register	stered office a	ce address in Flo	rida, enter the na	ame of the	SEP 17	F 5 13 6 3
Name of New Registered Agent:	Ian G. Ba	cheikov, Esq.			<u></u>	i
-	945 Pennsylvania Avenue, 1st Floor		<u>ಭ</u>			
New Registered Office Address:			(Florida street add	lress)	57	2000
	Miami Be	each		Florida <u>33139</u>		
		(City)		(Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	nt. I am fa	miliar with and a				•
_	S	ignature of New 1	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: X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PD	Christopher D. Mitchell	945 Pennsylvania Avenue
Add			1st Floor
Remove			Miami Beach, Florida 33139
2) X Change	<u>VPD</u>	Shantell Mitchell	945 Pennsylvania Avenue
Add			1st Floor
Remove			Miami Beach, Florida 33139
3) X Change	VPD	Mark Causey	945 Pennsylvania Avenue
Add			1st Floor
Remove			Miami Beach, Florida 33139
4) X Change	<u>T</u>	Renee Wright	945 Pennsylvania Avenue
Add			1st Floor
Remove			Miami Beach, Florida 33139
5) X Change	SD	Robin Kenson	945 Pennsylvania Avenue
Add			1st Floor
Remove			Miami Beach, Florida 33139
6) Change	D	Mark Causey	Erroneously listed twice on sunbiz
Add			
X Remove			

FILED SECRETARY OF STATE TALL KYASSIE FLORIDA

If amending or adding additional Articles, enter change(s) here: attach additional sheets, if necessary). (Be specific)		
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	e date of each amendment this document was signed		if other than the
	ective date <u>if applicable</u> :	August 31, 2015	
	egove daje <u>ir appareable</u> .	(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	ere 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 directors.	
	Dated	1/8/2015	
	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)	_
	1	ristopher D. Mitchell	SEC TALL
	Pre	(Typed or printed name of person signing) esident  (Title of person signing)	CRETARY OF STATE LAPASSEE TORID SEP 17 PH 3: 57