N15000009344

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	Coole Observations Fo	oundation Inc		
DOCUMENT NUMBER:	N15000009344			
The enclosed Articles of Am	endment and fee are subm	itted for filing.	,	
Please return all corresponde	nce concerning this matter	to the following:		
Russell A. Yagel, Esq.	•			
	(Name of Contact Pe	rson)	
Hershoff, Lupino & Yagel, l	LLP			
		(Firm/ Company)	
90130 Old Highway				
		(Address)		
Tavernier, FL 33070				
	(City/ State and Zip (Code)	
dboyce@hlylaw.com			*	
E	-mail address: (to be used	for future annual rep	ort notification)
For further information conc	erning this matter, please c	all:		
Russell A. Yagel, Esq.		at		852 8440
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida I	Department of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & C Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi S Certifi	Filing Fee cate of Status ed Copy ional 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 of

TALEARING AMIL: 38

Coole Observations Foundation Inc

		10 n C 7
(Name of Corporation as current	tly filed with the Florida Dept. of State) (E.)
N15000009344		•
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corporati</i>	on adopts the following
A. If amending name, enter the new name of the corporati	on:	
N/A		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbrevial	ion "Corp." or "Inc."
B. Enter new principa l office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
	-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office		f the
new registered agent and/or the new registered of fice a	ddress:	
Name of New Registered Agent: N/A		
New Registered Office Address:	(Florida street address)	
	, Flo	orida
	(City)	Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		the position.
	ignature of New Registered Agent if cha	nging

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>Mil</u>	n Doe te Jones ty Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	P/T	Thomas Campbell	116 Coral Ave
x Add			Tavernier, FL 33070
Remove			
2) Change	VP/S	Ivette Ortiz-Coole	806 Burton Dr
x Add	_		Tavernier, FL 33070
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)			
N/A	•		
	,		
	•		
·			
	•		

	e date of each amend this document was s	· · · · · · · · · · · · · · · · · · ·	, if other than the
Eff	ective date <u>if applic</u> a		
		(no more than 90 days after amendment file date)	
		d in this block does not meet the applicable statutory filing requirements, this date will not le on the Department of State's records.	e listed as the
Ado	option of Amendme	nt(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
	There are no memb adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	•
	Dated _	October 27, 2015	
	Signature 4	The Calles	
	Ì	By the chairman or vice of airman 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)	
		Thomas Campbell	
		(Typed or printed name of person signing)	
		Incorporator/Director	
		(Title of person signing)	