N15000011510

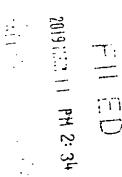
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COVER LETTER

TO: Amendment Section Division of Corporations

Florida Memorial NAME OF CORPORATION:	University Foundation
N15000011510 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this man	atter to the following:
Cynthia W. Curry	
-	(Name of Contact Person)
Florida Memorial University Foundation	
	(Firm/ Company)
15800 NW 42nd Avenue	
	(Address)
Miami Gardens, FL 33054	
	(City/ State and Zip Code)
cynthia.curry@fmuniv.edu	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, ples	ase call:
Cynthia W. Curry	305 626-3614
(Name of Contact Pers	
Enclosed is a check for the following amount made	payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	& D\$43.75 Filing Fee & D\$52.50 Filing Fee IS Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallabassee, 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

Florida Memorial University Foundation (Name of Corporation as currently filed with the Florida Dept. of State) N15000011510 (Document Number of Corporation (if known) 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: 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 BE 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 street address) New Registered Office Address: (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.

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: X_Change X_Remove X_Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Dr. Jaffus Hardrick	15800 NW 42nd Avenue
X Add			Miami Gardens, FL 33054
Remove			
2) X Change	CDP	Charles W. George	15800 NW 42nd Avenue
Add			Miami Gardens, FL 33054
Remove	VD	Walt Weatherington	15800 NW 42nd Avenue
3) X Change Add			Miami Gardens, FL 33054
Remove			
4) X Change	TSD	Cynthia W. Curry	15800 NW 42nd Avenue
Add			Miami Gardens, FL 33054
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)			
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•		January 29, 2019	
•	e date of each amendment e this document was signed	•	, if other than the
Fff	ective date <u>if applicable</u> :	January 29, 2019	
		(no more than 90 days after amendment file do	ate)
		is block does not meet the applicable statutory filing require Department of State's records.	rements, this date will not be listed as the
Ad	option of Amendment(s)	(<u>CHECK O</u> NE)	
	The amendment(s) was/w was/were sufficient for a	ere adopted by the members and the number of votes cast f proval.	for the amendment(s)
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendirectors.	dment(s) was/were
	Dated		
	have j	chairman or vice chairman of the board, president or other of been selected, by an incorporator – if in the hands of a reourt appointed fiduciary by that fiduciary) (Typed or printed name of person sign (Title of person signing)	receiver, trustee, or