N15000011941

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(Address)
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

John & Tarra Stetson NAME OF CORPORATION:	Charitable Foundation	n Inc	
N15000011941			
The enclosed Articles of Amendment and fee are subn	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
John Stetson			
	(Name of Contact Per	(son)	
John & Tarra Stetson Charitable Foundation Inc			
	(Firm/ Company)	
2300 E Las Olas Blvd. 4th Floor			
	(Address)	•	
Fort Lauderdale FL 33301			
	(City/ State and Zip C	Jode)	
stetson.john@gmail.com			
E-mail address: (to be used	for future annual rep	ort notification	1)
For further information concerning this matter, please	call:		
John Stetson	at	561	351-3777
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	iyable to the Florida Γ	Department of !	State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Div	eet Address nendment Sect cision of Corpo fton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

the following				
Thursday				
The new p," or "Inc,"				
2300 E Las Olas Blvd				
4th Floor				
2300 E Las Olas Blvd				
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ion.				

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.

Fixample: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
<u>Type of Action</u> (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
Add Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

If amending or adding (attach additional sheets,	if necessary).	(Be specific)	ngersy nere.					
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The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) 1.	
There are no members or membadopted by the board of directors	ners entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Dated	1,/,7	
Signature	Jah-S	
(By the chair have not be	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	John Stetson (Typed or printed name of person signing)	
	(1) sped or printed name of person signing)	
	President (Title of person signing)	
	(Title of person signing)	

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