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ROBERT AND CARI WALSH FAMILY FOUNDATION INC

attodge

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43.75

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

ROBERT AND NAME OF CORPORATION:	CARI WALSH FAMILY FOUNDATION
N15000012098	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
TONI A. RITCHEY	
	(Name of Contact Person)
FISCHER & RITCHEY LLP	
	(Firm/ Company)
950 BOARDWALK, STE 201	
	(Address)
SAN MARCOS, CA 92078	
	(City/ State and Zip Code)
toni@frlawfirm.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, p	lease call;
TONI A. RITCHEY	760 471-1100
(Name of Contact Pe	erson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	ee & =\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)    Copy
Mailing Address	Street 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



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ROBERT AND CARI WALSH FAMILY FOUNDATION, INC.

(Name of Corporation as c	urrently filed with the Flor	ida Dept. of State)
N15000012098		
(Document	Number of Corporation (if ki	nown)
Pursuant to the provisions of section 617.1006, Florida samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDI</u>	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Fi	lorida street address)
THE RESIDENCE OF THE PARTY OF T		Platte
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regil hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept	t the obligations of the position,
	Signature of New Regis	tered 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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				·
2) Change		<del></del>		
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add		<del>_</del>		
Remove				
5) Change				
Add		_		
Remove				
6) Change	<u> </u>			
Add				
Remove				

Ε.	<u> If</u>	amen	ding	or	ade	ding	additi	onal	<u>Artic</u>	les,	enter	change(s	<u>) here:</u>

(attach additional sheets, if necessary). (Be specific)

ARTICLE VIII	DEDICATION	AND DISSOI	LITION	CLAUSE
AKTICLE VIII	DEDICATION	זטפפוע עוזא	CITON	CLAUSE

The property of this corporation is irrevocably dedicated to charitable purposes and no part of the net income or assets
of this corporation shall ever inure to the benefit of any director, officer or member thereof or to the benefit of any
private person. Upon the dissolution or winding up of the corporation, its assets remaining after payment, or provision for
payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation
which is organized and operated exclusively for charitable purposes and which has established its tax exempt status
under Section 501(c)(3), Internal Revenue Code.

Πæ	date of each amen	iment(x) adoption:	if other than the
inte	this document was	signed.	
Hc	ctive date <u>if applic</u>	able:	
		(no more than 90 days after amendment file date)	,—
		d in this block does not meet the applicable statutory filing requirements, this date to on the Department of State's records.	will not be listed as the
Lde	ption of Amendme	at(s) (CHECK ONE)	
מ	The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for the untendment for approval.	nt(s)
	There are no ment adopted by the be	ers of members entitled to vote on the amendment(s). The amendment(s) was/we aid of directors.	ne.
	Dated	FEBRUARY 22, 2018	
	Signature	Cari Walk	Management statement and an experience of the statement o
		By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other count appointed fiduciary by that fiduciary)	
		CARI WALSH	
		(Typed or printed name of person signing)	<del>-</del>
		PRESIDENT	
		(Title of person signing)	· <del>***</del>