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(((H160002997013)))



H160002997013ABC2

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN:
Account Number : 120020000140
Phone : (561)844-3600
Fax Number : (561)842-4104

Email Address: LR & FCOHENLAW. COM

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN JORDAN SCHUMAN FOUNDATION FOR KINDNESS, INC.

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I ALBRITTON

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TO: Amendment Section

COVER LETTER

Division of Corpo	orations		
NAME OF CORPOR	ATION: JORDAN SCHU	MAN FOUNDATION FOR	KINDNESS, INC.
DOCUMENT NUME	BER: N16000000575		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	PETER R. RAY, ESQ.		
		Name of Contact Person	n
	COHEN NORRIS ET AL.		
		Firm/ Company	
	712 U.S. HIGHWAY ONE,	SUITE 400	
1		Address	
	NORTH PALM BEACH, FL	. 33408	
		City/ State and Zip Cod	e
LR@	FCOHENLAW.COM		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
PETER R. RAY, ESQ).	at () 844-3600
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Cortificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address	Street	Address
	ndment Section		Iment Section
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
	hassee, FL 32314		executive Center Circle

Tallahassee, FL 32301



December 8, 2016

FLORIDA DEPARTMENT OF STATE

JORDAN SCHUMAN FOUNDATION FOR KINDNESS, INC. 8642 MARLAMOOR LANE
WEST PALM BEACH, FL 33412

SUBJECT: JORDAN SCHUMAN FOUNDATION FOR KINDNESS, INC.

REF: N16000000575

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The first page of the amendment is for a profit corporaton. Please correct the document so that its filed pursuant to the correct statute number.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II FAX Aud. #: B16000299701 Letter Number: 716A00026082

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ntly filed with the Florid	la Dept. of State)	
N16000000575			
(Document Num	nber of Corporation (if known	own)	
ursuant to the provisions of section 617.1006, Florida State mendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For</i>	Profit Corporation adopts the	following
. If amending name, enter the new name of the corpora	ation:		
•			The new
ame must be distinguishable and contain the word "corpor Company" or "Co." may not be used in the name.	ration" or "incorporated	or the abbreviation "Corp."	or "Inc."
 Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES.</u> 	67		
rancipui ojjice uturess <u>14031 BB A 31 KBE 1 ADDKIS.</u>	<u></u> 1		23
			<u>.</u>
		<u> </u>	<u>문</u>
Enter new mailing address, if applicable:		2000年	1
(Mailing address MAY BE A POST OFFICE BOX)		(3.7)	_&
			\geq
	·	ਜ਼ਾਂ <i>ਦ</i> : © ਜੁ	ب
If amending the registered agent and/or registered of	Mae addrase in Klapida e	onter the name of the	9
new registered agent and/or the new registered office	address:	sater the name of the	
			
Name of New Registered Avent:	· · · · · · · · · · · · · · · · · · ·		
	 		
New Registered Office Address:	(Flo	rida strees address)	
New Registered Office Address.			
		, Florida	
	(City)	(Zip Code)	
lew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am		he obligations of the position.	
			<u> </u>
	Signature of New Registe	red Agent, if changing	

Example:

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.

X Change	PT John	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ce Jones	
X Add	<u>\$V</u> Sall	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	VP/DIR	JUSTIN SCHUMAN	605 WEST 137TH STREET
Add			APARTMENT 43
Remove		•	NEW YORK, NY 10031
2) Change	VP/DIR	PERI SCHACKNOW	7 LONGWOOD ROAD
Add			S. HUNTINGTON, NY 11746
X Remove			
3) Change	T/DIR	PETER SCHACKNOW	7 LONGWOOD ROAD
Add			S. HUNTINGTON, NY 11746
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change		<u></u>	_
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ARTICLE III IS AMENDED TO READ AS FOLLOWS:
"ARTICLE III. PURPOSE AND DISSOLUTION CLAUSES:
1. PURPOSE CLAUSE: This organization is organized exclusively for charitable, religious, educational, or scientific
purposes, including for such purpose, the making of distributions to raise public awareness and increase community
involvement by recognizing and encouraging individuals and organizations that help to create a culture of kindness and
positive experiences for those who can become effective leaders and assist in the betterment in their communities and others.
To carry on such activities that are in furtherance of and in support of the foregoing purpose as are lawful and proper for
corporations formed under the Florida Not-For-Proft Corporation Act and Section 501(c)(3) of the Internal Revenue Code,
or the corresponding section of any future federal tax code.
2. DISSOLUTION CLAUSE: Upon the dissolution of this organization, assets shall be distributed for one or more exempt
purposes within the meaning of Section 501(c)(3) of the Internal Revenue Coide, or corresponding section of any future
federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose."

12-08-16 11:56am From-	T-912	P.07/07	F-596
The date of each amendment(s) adoption:		, if	other than th
Effective date if applicable: (no more than 90 days after amendment)	nt tile doze		
Note: If the date inserted in this block does not meet the applicable statutory filin document's effective date on the Department of State's records.	•	ll not be lis	sted as the
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the members and the number of vot was/were sufficient for approval.	es cast for the amendment(s	>	
There are no members or members entitled to vote on the amendment(s). The adopted by the board of directors.	e amendment(s) was/were		
Dated 12/3/2016			
Signature Dolume	,		
(By the chairman or vice chairman of the board, president have not been selected, by an incorporator — if in the hand other court appointed fiduciary by that fiduciary)			
BRIAN SCHUMAN			
(Typed or printed name of per	son signing)		
PRESIDENT / DIRECTOR			
(Title of person sig	ning)		