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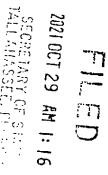
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Lift Putnam, Inc.	
DOCUMENT NUMBER: N16000000918	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Timothy Keyser, J.D.	
(Name of Contact Person)	
Keyser & Sharbaugh, P.A.	
(Firm/ Company)	
501 Atlantic Avenue	
(Address)	
Interlachen, Florida 32148	
(City/ State and Zip Code)	
Info@ks.legal	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Timothy Keyser, J.D. at (386) 684-4673	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
☐ \$35 Filing Fee ☑\$43.75 Filing Fee & ■\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status — Certified Copy — Certificate of Status	
Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy	
enclosed) (Additional Copy is	
Enclosed)	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment Articles of Incorporation οf

FILED

2021 OCT 29 AM 1:16

Lift Putnam, Inc.		2021 OC 25 A
(Name of Corporation as currently filed with the Florida	Dept. of State)	SEORETARY O TALEAHASSEE.
(Document Num	ber of Corporation (if kno	wn)
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For</i> .	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ntion:	
The Education Foundation of Putnam County, Inc.		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporated"	or the abbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable:	601 Reid Street	
(Principal office address MUST BE A STREET ADDRESS	<u>S</u>) Palatka, Florida 32177	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	601 Reid Street	
and the state of t	Palatka, Florida 32177	
D. If amending the registered agent and/or registered of	fice address in Florida. e	nter the name of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:		
New Registered Office Address;	<i>iFlor</i>	ida sireci addressi
		, Florida
	(City)	(Zıp Code)

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	PT John Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>CD</u>	Vernon Myers	2500 Fairway Drive Palatka, Florida 32177
2) Change Add	<u>VD</u>	Les Sims	640 Putnam County Blvd East Palatka, FL 32131
Remove 3) Change X Add Remove	TD	Debbie Donlan	11 Cinnamon Grove Lane Palm Coast, FL 32137
4) Change X Add	SD	Christian Calderon	104 Oak Tree Lane Palatka, FL 32177
Remove 5) Change	CEO	Robert M. Perry	601 Reid Street Palatka, Florida 32177
6) Change Add			
E. If amending or addir (attach additional shee	ng additional Arti	icles, enter change(s) here: (Be specific)	

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:

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Example: \underline{X} Change \underline{X} Remove \underline{X} Add	<u>V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Yashcika Benford	5504 Overcreek Drive Elkton, Fl. 32033
Remove 2) Change Add	D	Kari Reynolds	640 West Peniel Road Palatka, FL 32177
Remove Change Add Remove	D	Susan Gaboriau	204 SW 51st Avenue Interlachen, FL 32148
4) Change ✓ Add	D	Mary Ratliff	Interlachen, FL 32148
Remove 5) Change 4 Add	D	Margie Payne	2700 Fairway Drive Palatka, FL 32177
— Remove 6) — Change √ Add	D	Lulu Gail Parrish	144 S. Oakland Avenue San Mateo, FL 32187
		nal Articles, enter change(s) here: ssary). (Be specific)	

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.

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Example: X Change X Remove X Add	PT John Do V Mike Jo \$V Sally Sr	nes	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Joyce Oliver	185 W. River Road Palatka, FL 32177
Remove			
2) Change Add	D	Timothy Keyser	211 Point Ida Court Interlachen, FL 32148
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
δ) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Arti ts. if necessary).	cles, enter change(s) here: (Be specific)	
			·
			

		
		
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The date of each amendment(s) adoption: date this document was signed.	27 September 2021	if other than the
Effective date if applicable: 27 Septembe	: 2021	
	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does a document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes east for the amendment(s)	

Dated	- October 27, 2021
Dated	
Signatur	. K. Vinn Myen Gr.
	(By the chairman or vice chairman 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)
	Vernon Myers
	(Typed or printed name of person signing)