(ann)00004846

(Re	questor's Name)	
(Ad	dress)	
,	,	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
/ (Bu	siness Entity Nar	me)
(Do	ocument Number)	<u></u>
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



400287343884

07/01/16--01005--026 **43.75

JUL 1 1 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section **Division of Corporations**

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: DEFFEKS T	Mission Foundation, Inc.
DOCUMENT NUMBER: NIGOOOC)4845
The enclosed Articles of Amendment and fee are submitted	
Please return all correspondence concerning this matter to the	
Kathleen Whale	90
(Nam	e of Contact Person)
Derreks Missing	a Foundation, inc.
1012 NW 30	th Terr
	(Address)
Cape Cora	1, Fl. 33993
•	State and Zip Code)
E-mail address: (to be used for fu	GMAIL COM fure annual report notification)
For further information concerning this matter, please call:	
Kathleen Whaten (Name of Contact Person)	at 239 243-6273 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	
S35 Filing Fee	·
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

Derreks Mission Fou	ndation, inc.	
NIGODOOUS	15	State)
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corp</i> o	oration adopts the following
A. If amending name, enter the new name of the corporation	on:	
	NA	The new
name must be distinguishable and contain the word "corporati "Company" or "Co," may not be used in the name.	on" or "incorporated" or the abbr	eviation "Corp." or "Inc."
	NΙΔ	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	11/_1	TEST ST T
		- 3 - M
C. Enter new mailing address, if applicable:	NIA	新星
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	15// 1	
	 	<u> </u>
		7.5.
D. If amending the registered agent and/or registered office		me of the
new registered agent and/or the new registered office ac	ldress:	
Name of New Registered Agent:	NA	
New Registered Office Address:	(Florida street addr	ess)
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligation	ns of the position.
·	AIA	
Sig	gnature of New Registered Agent, if	f 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: XChange X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)	<u>S</u> _	Kelly Whalen	401 SEIDTH PL. Cape Coral, Fl. 33990
2) Change Add	TR	Wynn Whalen	4539 Pasaplum Ave Punta Gorda, Fl.
Remove 3) Change Add Remove		Jennifer Pogarny- Barth	2238 Colson Ave#C Sarasota, FL. 34234
4) Change Add Remove		James Doyle	1510 SW 50th St #20L Cape Coral, Fl. 339114
5) Change Add Remove		David Schwartz	3700 Hyde Parkct. Fort Myers, Fl. 33908
6) Change Add Remove	Λb	Hank Bertodatto	1732 SW 36th Terr Cape Coral, Fl. 33914

f amending or adding additional Articular Arti	(Be specific)			
			<u> </u>	
			1.1.20	
		.		
			<u></u>	
	· · · · · · · · · · · · · · · · · · ·	•		.

	.			
		,		

	e date of each amendment(s) adoption this document was signed.	n:N	'A	, if other than th
	ective date <u>if applicable</u> :	(no more than 90 days after a	mendment file date)	
	ee: If the date inserted in this block do- ument's effective date on the Departme	es not meet the applicable statu	atory filing requirements, this date will no	ot be listed as the
4de	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the numb	er of votes cast for the amendment(s)	
Á	There are no members or members en adopted by the board of directors.	ntitled to vote on the amendme	nt(s). The amendment(s) was/were	
	Dated June 2	27,2016		
	have not been sele		president or other officer-if directors the hands of a receiver, trustee, or	_
	Kat	Typed or printed name	ne of person signing)	
	Pres	dent	person signing)	