N160000006485

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Derek Hatcher Foundation N16000006485 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Debbie Rizer
(Name of Contact Person) Derek Hatcher Foundation
(Firm/Company) 2379 Stoney Glen Drive Fleming /s/and, FL 32003
(City/ State and Zip Code) Hatcher Foundation @ gmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person) at 904-213-8487

(Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ☑S43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(Additional Copy is Enclosed)

Articles of Amendment

Artici	to		
Article	s of Incorporation		
Derek Hatcher (Name of Corporation as curren	of Foundat only filed with the Florida		
N/600006		,	
	per of Corporation (if know	n)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Pr</i>	ofit Corporation adopts the	following
A. If amending name, enter the new name of the corporat	n/A		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" of	r the abbreviation "Corp." c	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	, <u></u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	n/r	THE AREASSEE	7018 JUL 16 E
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		er the name of the	16 16
Name of New Registered Agent:	1/4		
New Registered Office Address:	MA	street address), Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered	(City)	(Zīp Code)	
I hereby accept the appointment as registered agent. I am fa	miliar with and accept the t	obligations of the position.	
	ignature of New Registerea	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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) X Change Add Remove	I	Patricia Linge	_2085 Salt Myrtle L _Fleming sland.FL 32003
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
name correction needed be cause 14 was entered wrong on the original application filed on 2/5/18
it was entered wrong on the
original application filed on 2/5/18

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The	e date of each amendment(s) adoption:		, if other than the	
date	e this document was signed.	ı		
F (f.	ective date <u>if applicable</u> :	2 //8		
15114		ore than 90 days after amendment file date)		
	te: If the date inserted in this block does not be tument's effective date on the Department of S	meet the applicable statutory filing requirements, this date will not State's records.	be listed as the	
Ado	option of Amendment(s) (<u>CHI</u>	ECK ONE)		
	The amendment(s) was/were adopted by the was/were sufficient for approval.	e members and the number of votes cast for the amendment(s)		
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
	Dated			
	Signature Debbie	Rei	_	
		chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or duciary by that fiduciary)		
	Debbie 1	Rizer		
		(Typed or printed name of person signing)		
	Preside			
		(Title of person signing)		