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Division of Corporations

H 1600008581

Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DAVID AND TERRI KESTER FOUNDATION, INC.**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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MAR 11 2024

T. LEMIEUX

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Articles of Amendment
to
Articles of Incorporation
of

David and Terri Kester Foundation, Inc.

Name of Corporation as currently filed with the Florida Dept. of State

N15000008581

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

54 Cedar Hill Dr.

Asheville, NC 28803

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

54 Cedar Hill Dr.

Asheville, NC 28803

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: C T Corporation System

1200 South Pine Island Road

(Florida Street address)

New Registered Office Address:

Plantation

(City)

Florida

33324

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Olga Hinkel - VP

Signature of New Registered Agent, if changing

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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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Exec. D</u>	<u>David Kester</u>	<u>54 Cedar Hill Dr.</u> <u>Asheville, NC 28803</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Director</u>	<u>Theresa P. Kester</u>	<u>54 Cedar Hill Dr.</u> <u>Asheville, NC 28803</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Director</u>	<u>Rachel A. Kester</u>	<u>1501 NC 97 Hwy E</u> <u>Zeluhon, NC 27592</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Director</u>	<u>Joseph A. Kester</u>	<u>1511 Kentmere Lane</u> <u>Asheville, NC 28803</u>
5) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Director</u>	<u>Michael David Kester</u>	<u>3644 Cobblerfield Circle SE Apt. 1</u> <u>Caledonia MI 49316</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

F. If amending or adding additional Articles, enter changes) here.

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

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- 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 March 7, 2024

Signature: David M. Kester ED

(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)

David M. Kester

(Typed or printed name of person signing)

Executive Director

(Title of person signing)

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