Florida Department of State

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COR AMND/RESTATE/CORRECT OR O/D RESIGN SHELTERING PALMS FOUNDATION, INC.

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Articles of Amendment to Articles of Incorporation

Sheltering Palms Foundation, Inc.		
(Name of Corporation as	currently filed with the	Torida Dept. of State)
N1600000B617		
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	For Profit Corporation adopts the following
A. If amending pame, enter the new name of the co	rporation:	
Harvey Polly Foundation, Inc.		The new
name must be distinguishable and contoin the word "c "Company" or "Co." may not be used in the name.	orporation" or "Incorpor	ated" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST RE A STREET ADD</u>		
C. <u>Enter new mailing address, if applicable;</u> (Mailing address <u>MAY BE A POST OFFICE BO</u>	3 0	
D. If amending the registered agent and/or register new registered agent and/or the new registered.		ids, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	•	(Florida street oddress)
_		, Florida
	(City)	Florida
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	stered Agent: I am familiar with and acc	rept the obligations of the position.
	Signature of New Re	gistered Agens, if changing

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If smeading 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 afficer/director title by the first letter of the affice 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 afficer/director holds more than one title, list the first letter of each affice 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 X Remove X Add	PT John D. Y Mike Je SV Sally S	inst	
Type of Action (Check One)	Title	Name	Address
1)Change	•	***	
Add			
2) Change Add		·	
Remove			
3) Change Add			
Remove 4) Change			
Add		,	
5) Change			
Add			
6)Change			
ⅆ			• · · · · · · · · · · · · · · · · · · ·
Remove			

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E. If amending or adding additional Articles, enter change(s) here: (artach additional thesis, if necessary). (Be specific)	

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	September <u>30</u> , 2016	ماد حماد مادع
The date of each amen late this document was		, if other than the
Effectivo dato <u>if applic</u>	eble: (no more than 90 days after amendment file date)	
<u>Vota:</u> If the date inserte locument's affective da	d in this blook does not most the applicable statutory filing requirements, this date will not a on the Department of State's records.	it be listed as the
Lidoption of Amendma	at(s) (CHECK ONE)	
The amendment(s) was/were sufficient	was/ware adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no member edopted by the box	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
Dated	September 3 1, 2016	
Signature		·
	By the absumm or vice commission the colorid, president or other option-in directors have not been selected, by an incorporator—if in the hands of a receiver, trustee, or when pourt appointed fiduciary by that fiduciary)	
	Harvey Polty	
	(Typed or printed name of person signing)	
	Director .	
	(Title of source of whee)	

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