N16000009044

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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November 30, 2016

PATRICIA JONES CPA / JONES & COMPANY CPAS PA 2513 SEVEN SPRINGS BLVD. TRINITY, FL 34655 US

SUBJECT: NEW PORT RICHEY LIBRARY FOUNDATION, INC.

Ref. Number: N16000009044

We have received your document for NEW PORT RICHEY LIBRARY FOUNDATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 416A00025482

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: NEW PORT RICHEY LIBRARY FOUNDATION, INC. | | | | | | |
|--|---|--|--|--|--|--|
| DOCUMENT NUMBE | ER: | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | | |
| Please return all corresp | Please return all correspondence concerning this matter to the following: | | | | | |
| F | ATRICIA JONES, CPA | | | | | |
| _ | Name of Contact Person | | | | | |
| J | JONES & COMPANY CPAS PA | | | | | |
| - | | Firm/ Company | | | | |
| 2 | 513 SEVEN SPRINGS BLV | /D | | | | |
| _ | Address | | | | | |
| T | TRINITY, FL 34655 | | | | | |
| - | | City/ State and Zip Code | ? | | | |
| PAT@ | JONESCPAS.COM | | | | | |
| | | ed for future annual report | notification) | | | |
| For further information concerning this matter, please call: | | | | | | |
| PATRICIA JONES, CF | PA . | at (| 845-4166 | | | |
| Name of Contact Person Area Code & Daytime Teleph | | de & 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 & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Amend Divisio Clifton 2661 E | Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301 | | | |

Articles of Amendment to Articles of Incorporation of



2016 DEC -6 AM 9: 00

| NEW PORT RICHEY LIBRARY FOUNDATION, INC. | | |
|--|----------------------------|--|
| (Name of Corporation as cur | rently filed with the Flo | rida Dept. of State) |
| N16000009044 | | • |
| (Document Nu | mber of Corporation (if k | (nown) |
| Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation: | tutes, this Florida Not Fo | or Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corpo | ration: | |
| name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name. | oration" or "incorporate | The new d" or the abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u> . | <u>SS</u>) | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered of fice | | , enter the name of the |
| Name of New Registered Agent: | s | |
| New Registered Office Address: | (F | Floridu street address) |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an | | t the obligations of the position. |
| | Signature of New Regis | tered 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) | Title | Name | Address |
| 1)Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | - | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| | | | |
| Remove | | | |

E. If amending or adding additional Articles, enter change(s) here:

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

ARTICLE III: IN ADDITION, THE ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. ARTICLE IX: NO PART OF THE NET EARNINGS OF THE CORPORATION SHALL INURE TO THE BENEFIT OF. OR BE DISTRIBUTABLE TO ITS MEMBERS, TRUSTEES, OFFICERS, OR OTHER PRIVATE PERSONS, EXCEPT THAT THE CORPORATION SHALL BE AUTHORIZED AND EMPOWERD TO PAY REASONABLE COMPENSATION FOR SERVICES RENDERED AND TO MAKE PAYMENTS AND DISTRIBUTIONS IN FURTHERANCE OF THE PURPOSES DESCRIBED IN SECTION 501(C)(3). NO SUBSTANTIAL PART OF THE ACTIVITIES OF THE CORPORATION SHALL BE THE CARRYING ON OF PROPAGANDA, OR OTHERWISE ATTEMPTING TO INFLUENCE LEGISLATION, AND THE CORPORATION SHALL NOT PARTICIPATE IN, OR INTERVENE IN (INCLUDING THE PUBLISHING OR DISTRIBUTION OF STATEMENTS) ANY POLITICAL CAMPAIGN ON BEHALF OF OR IN OPPOSITION TO ANY CANDIDATE FOR PUBLIC OFFICE. NOTWITHSTANDING ANY OTHER PROVISION OF THESE ARTICLES, THE CORPORATION SHALL NOT CARRY ON ANY OTHER ACTIVITIES NOT PERMITTED TO BE CARRIED ON (a) BY A CORPORATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR (b) BY A CORPORATION, CONTRIBUTIONS, TO WHICH ARE DEDUCTIBLE UNDER SECTION 170(C)(2) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. ARTICLE X: UPON THE DISSOLUTION OF THIS ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO THE FEDERAL GOVERNMENT, OR TO A STATE OR LOCAL GOVERNMENT, FOR A PUBLIC PURPOSE.

| The | date of each amendment(| s) adoption: | <u>i i i i i i i i i i i i i i i i i i i </u> |
|------|---|---|---|
| date | this document was signed. | | JIVISION OF CORPORATE |
| Effe | ective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | 2016 DEC -6 AM 9: 00 |
| | | s block does not meet the applicable statutory filing requirements, this e Department of State's records. | date will not be listed as the |
| Add | option of Amendment(s) | (<u>CHECK ON E</u>) | |
| | The amendment(s) was/we was/were sufficient for app | re adopted by the members and the number of votes cast for the amend roval. | lment(s) |
| | There are no members or nadopted by the board of di | nembers entitled to vote on the amendment(s). The amendment(s) was rectors. | /were |
| | Dated DECE | MBER 5, 2016 | |
| | Signature | trumper CPA | |
| | have no | hairman or vice chairman of the board, president or other officer-if did t been selected, by an incorporator – if in the hands of a receiver, trust ourt appointed fiduciary by that fiduciary) | |
| | PAT | RICIA JONES, CPA | |
| | | (Typed or printed name of person signing) | |
| | DIR | ECTOR | |
| | | (Title of person signing) | |