# N1660000039339

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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

DOCUMENT NUMBER:	)	
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Player raturn all correspondence concerning this matter to the following:	)	
r lease return an correspondence concerning this matter to the ronowing.	)	
STEVEN T. SLATEM	)	
(Name of Contact Person)		
SLATEM FAMILY FOUNDATION, INC.		
(Firm/ Company)		
701 E. NEW HAVEN AVE., #211		
(Address)	,	
MELBOURNE, FLORIDA 32901		
(City/ State and Zip Code	)	
INFO@SLATEM.ORG		
E-mail address: (to be used for future annual report no	offication)	
For further information concerning this matter, please call:		
STEVEN T. SLATEM at (3	321) 216-6676	
	a Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Depar	tment of State:	
■ \$35 Filing Fee  □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status  Certificate of Status  (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Street A		
	Amendment Section Division of Corporations	
	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

#### SLATEM FAMILY FOUNDATION, INC.

## (Name of Corporation as currently filed with the Florida Dept. of State) N16000009229 (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: SLATEM FOUNDATION, INC. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. "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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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	PT         John D           V         Mike J           SV         Sally S	ones ·	
Type of Action (Check One)	<u>Title</u>	<u>Name</u> .	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove	***************************************		
6) Change Add Remove	***************************************		

F. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary) (Be specific)						
PHILANTHROPIC SOURCE OF FUNDING FOR ITS OWN CHARITABLE PRIVATE FOUNDATION ACTIVITIES.						
RESEARCH, DOCUMENTATION, ARCHIVAL, REPORTING, PUBLISHING, PROTECTION AND DEFENSE IN MATTERS CONCERNING THE SLATEM FAMILY NAME WORLDWIDE.						

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
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 NOVEMBER 23, 2016	
Signature  (By the chairman or vice chairman of the board, president or other officer-if directors have not been reflected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
STEVEN T. SLATEM	
(Typed or printed name of person signing)	
PRESIDENT, CHIEF EXECUTIVE OFFICER	
(Title of person signing)	