6600011084 (Requestor's Name) (Address) 300291445703 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL 12/20/16--01008--006 **35.00 (Business Entity Name) (Document Number) Certificates of Status Certified Copies DEC

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- ,	<u>COVER LETTI</u>	<u>CR</u>				
TO: Amendment Section Division of Corporations						
Democracy Legacy, In NAME OF CORPORATION:				<u> </u>		
N16000011084		<u> </u>				
The enclosed Articles of Amendment and fee are subm	itted for filing.					
Please return all correspondence concerning this matter	to the following:					
Carolyn Holzman						
(Name of Contact Pe	rson)			<u> </u>	
Democracy Legacy						
	(Firm/ Company)				
2803 Gulf to Bay, Suite 421						
	(Address)			·		
Clearwater, FL 33759						
(1	City/ State and Zip (Code)				
info@democracylegacy.com				Fo	التنبيه	
E-mail address: (to be used f	or future annual rep	ort notification	1)		S D	-
For further information concerning this matter, please ca	all:				EC 2	ي کا حواہ سري - کا مورو ک
Carolyn Holzman	at	512	647.2335		O F	1
(Name of Contact Person)		(Area Code)	(Daytime Telep	hone Number)	- - - - - - - - - - - - - - - - - - -	
Enclosed is a check for the following amount made pays	able to the Florida I	epartment of !	State:		t: 09	
S35 Filing Fee 🖾 \$43.75 Filing Fee & C Certificate of Status	3\$43.75 Filing Fee (Certified Copy (Additional copy is enclosed)	Certif: Certif	D Filing Fee leate of Status led Copy lional Copy is sed)	3- 3-	-	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	An Div Cli 266	eet Address endment Secti ision of Corpo ton Building 1 Executive C lahassee, FL 3	enter Circle			

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Articles of Amendment to Articles of Incorporation of

Der	nocracy	Legacy

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

N16000011084

(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:

n/a			The new	
name must be distinguishable and contain the word "corpor	ation" or "incorp	orated" or the abbreviation "Corp."		
"Company" or "Co." may not be used in the name.				
B. Enter new principal office address, if applicable:	n/a			
(Principal office address MUST BE A STREET ADDRESS	[)			
			<u> </u>	
	<u> </u>			
C. Enter new mailing address, if applicable:		3 -14		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	n/a	 	÷	
			5	
				T
			<u></u>	
D. If amending the registered agent and/or registered off	fice address in Flo	ride enter the name of the	27. O	i Minero
new registered agent and/or the new registered office		and a career the manie of the	Te P	111
Name of New Registered Agent: n/a				24
n/a		· · · · · · · · · · · · · · · · · · ·	09	
11/a	- • • • • • • • • • • • • • • • • • • •	<u> </u>		
<u>New Registered Office Address:</u>		(Florida street address)		
n/a		n/a		
	(City)	, Florida (<i>Zip Code</i>)	<u>_</u>	
	(200)	(Zip Couc)		

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.

Signature of New Registered Agent, if changing

Page 1 of 4

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John E</u> <u>V</u> <u>Mike</u> <u>SV</u> Sally S	Iones	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) X Change	<u>Т</u>	Carolyn Holzman	13581 Pond Springs Road
Add			Suite 301
Remove			Austin, TX 78729
2) X Change	<u>S</u>	Jason Vercher	2803 Gulf To Bay, Suite 421
Add Remove			Clearwater, FL 33759
3) Change	D	Dany Bouchedid	3041 Gates Court
X Add			
Remove			Morris Plains, NJ 07950
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			<u> </u>
Remove			
6) Change			
Add			
Remove		Page 2 of 4	

	E. If amending or adding additional Art	icles, enter change(s) here:
•	(attach additional sheets, if necessary).	(Be specific)

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n/a _____ _____ _____

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The date of each amendment(s) adoption:	, ii	f other than the
date this document was signed.		

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

12/15/16 Dated Signature

(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)

Carolyn Holzman

(Typed or printed name of person signing)

Treasurer

(Title of person signing)



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