N14000011458

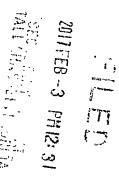
· (Requestor's Name)	
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PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
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Amendico

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COVER LETTER

TO: Amendment Section Division of Corporations

Wren & Roch Foundati	on, Inc.		
N16000011458 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submit	tted for filing.		
Please return all correspondence concerning this matter	to the following:		
Nancy E Ingalls	Name of Contact Perso		
(t	vame of Contact Perso	n)	
Nancy E Ingalls CPA	LLC		·
	(Firm/ Company)		
551 NW 77th Street,	Suite 206		
	(Address)		
Boca Raton, Florida	33487		
(0	City/ State and Zip Cod	le)	
ningalls@ningalls.com E-mail address: (to be used for future annual report notification)			
E-mail address: (to be used t	or nuture annual report	nouncation	1)
For further information concerning this matter, please ca	all:		
•			
Napov E Ingalla	at	561	910-3970
Nancy E Ingalls (Name of Contact Person)		rea Code)	(Daytime Telephone Number)
· ·	`	,	
Enclosed is a check for the following amount made pay	able to the Florida Dep	partment of	State:
□ \$35 Filing Fee □\$43.75 Filing Fee & 5	1843.75 Filing Fee &	□\$52.5	0 Filing Fee
Certificate of Status	Certified Copy		icate of Status
	(Additional copy is		ied Copy
	enclosed)		tional Copy is
		Encl	osed)
Mailing Address	Stree	t Address	
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Wren & Roo	ch Foundation, In	ic.
(Name of Corporation as cu	rrently filed with the Florida	a Dept. of State)
N16000	011458	
(Document N	lumber of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For P	Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated" (or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)	
	· · · · · · · · · · · · · · · · · · ·	
		7.0
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		UD someon
, , , , , , , , , , , , , , , , , , , ,		ن ت
	 -	7 70
D. If amending the registered agent and/or registered	office address in Florida, an	ter the name of the
new registered agent and/or the new registered off		tter the name of the
Name of New Registered Agent:		
Traine of their Registered Agent.		· ·
	(Floria	da street address)
New Registered Office Address:	(1 10711	an sireer addi ess)
		. Florida
	(City)	(Zip Code)
Naw Degistared Agent's Signature if shousing Degist	anad A.c4.	
New Registered Agent's Signature, if changing Regist- I hereby accept the appointment as registered agent. I a	erea Agent: im familiar with and accept the	e obligations of the position.
	Signature of New Register	ed 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 Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Remove			
2) Change			
Add			
3) Change			
Remove			
4) Change			
Add			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
Purpose: The organization is organized exclusively for charitable, religious, educational, or scientific purposes under					
Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.					
Dissolution: 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.					
·					

he date of each amendment(s) adoption:	if other than the
Issective date is applicable:	
(no more than 90 days after amendment file date)	
Vate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date locument's effective date on the Department of State's records.	will not be listed as the
Edoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.	11(\$)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wes adopted by the board of directors.	re .
Dated 1-18-17	· .
Signature \\ON\UU\chi	
(By the chairman or vice khairman of the board, president or other officer-if direct bave not been selected, by an incorporator — if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	Crs Of
Karen Hansen	
(Typed or printed name of person signing)	,
President	
(Title of person signing)	