Division of Corporations Electronic Filing Cover Sheet

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(((H22000115563 3)))



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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : HOLLAND & KNIGHT OF JACKSONVILLE

Account Number : 074323003114

Phone

: (904)353-2000

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN THE TOM THUMB CHARITY INC.

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A. RAMSEY

MAR 3 0 2022

Electronic Filing Menu

Corporate Filing Menu

Help

TO: Amendment Section

Tallahassee, FL 32314

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COVER LETTER

Division of Corporation	s		
NAME OF CORPORATIO	The Tom Thumb Ch	narity, Inc.	
DOCUMENT NUMBER: _	N16000011811		
The enclosed Articles of Ame	endment and fee are sub	mitted for filing.	
Please return all corresponde	nce concerning this matt	er to the following:	
James McCarthy			
		(Name of Contact Pers	een)
	***************************************	(Firm/ Company)	
		(Firm Company)	
97 Okeechobee Road			<u> </u>
		(Address)	
Hialeah, Florida 33010			
		(City/ State and Zip Co	ode)
	mail address; (to be used	for future annual repo	rt notification)
For further information conce	erning this matter, please	call;	
James McCarthy	Name of Contact Person	at	Area Code) (Daytime Telephone Number)
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made p	ayable to the Florida De	epartment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing A			t Address
Amendmer Division of	nt Section Corporations		ndment Section tion of Corporations
P.O. Box 6			Centre of Tallahassee
	e, FL 32314		N. Monroe Street, Suite 810

Tallahassee, FL 32303

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FILED H220001155633

Articles of Amendment to Articles of Incorporation of

2022 MAR 29 AM 11: 42

The Tom Thumb Charity, Inc.		A TRANSPORT OF THE
Name of Corporation as currently filed with the Flo	rida Dept. of State)	
N16000011811		
(Document)	Number of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Florida samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida N</i> o	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
Wishing Well Foundation of Florida, Inc.		The new
name must he distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorpo	
B. Enter new principal office address, if applicable:	N/A	
(Principul office address MUST BE A STREET ADDE	RESS)	
		
C. Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If a mondiage the manistered around a disconnection	4 . 65	did and with a many of the
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		tina, enter the name of the
Name of New Registered Agent: N/A	•	
-		(Florida street address)
New Registered Office Address.		
N/A	·	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. It		cept the obligations of the position.
	Signature of New Ro	egistered Agent, if changing

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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:

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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 officeridirector 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>Y</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title		Name	Address
1) Change Add	****	-		
Remove				
2) Change Add	<u> </u>	-		
Remove 3) Change Add Remove		.		
4) Change Add		<i>.</i>		
Remove				
5) Change Add		-		
Remove				
6) ChangeAdd	 	-		
Remove				
E. If amending or addin (attach additional sheet			cles, enter chânge(s) here: (Be specific)	
<i></i>		· · · · · · · · · · · · · · · · · · ·		
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To: +18506176380	
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2022-03-29 16:53:39 EDT

Holland & Knight, LLP

From: Carr, Pam (JAX - X25430

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	at recording and all the segments are as a		
		·	
The date of each amendment(s) a	doption: N/A		, if other than the
date this document was signed.	-		
Effective date if applicable:			
постью выс и принстые,	(no more than 90 days after	amendment file date)	
Note: If the date inserted in this bl document's effective date on the D	ock does not meet the applicable sta epartment of State's records.	ntutory filing requirements, this	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were a was/were sufficient for approx	dopted by the members and the nur	mber of votes east for the amend	iment(s)

adopted by the board of directors.

2022-03-29 16:53:39 EDT

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

Holland & Knight, LLP

From: Carr, Pam (JAX - X25430

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Dated	March 21, 2022						
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						
	differ court appointed fiduciary by that fiduciary) James McCarthy						
	(Typed or printed name of person signing)						
	President						
	(Title of person signing)						