

N170000002461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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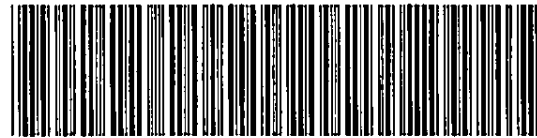
(Business Entity Name)

(Document Number)

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2017 SEP -1 AM 10:50

SEP 06 2017
J. H. A. R.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 3 Doves Charitable Foundation, INC

DOCUMENT NUMBER: N17000002461

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LaShonda Henderson

(Name of Contact Person)

Zeta Eta Zeta Chapter

(Firm/ Company)

PO Box 1975

(Address)

Fort Pierce Florida 34954

(City/ State and Zip Code)

ftpiercezetas@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LaShonda Henderson

772

301-2389

at

(Name of Contact Person)

(Area Code)

(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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2017 SEP - 1 AM 10:54
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

N/A

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

N/A

(Document Number of Corporation (if known))

2017 SEP - 1 AM 10:50

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 "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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)

C. Enter new mailing address, if applicable:

N/A

(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: N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

, Florida

(Zip Code)

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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>N/A</u> Change	_____	_____	_____
_____ Add	_____	_____	_____
_____ Remove	_____	_____	_____
2) <u>N/A</u> Change	_____	_____	_____
_____ Add	_____	_____	_____
_____ Remove	_____	_____	_____
3) <u>N/A</u> Change	_____	_____	_____
_____ Add	_____	_____	_____
_____ Remove	_____	_____	_____
4) <u>N/A</u> Change	_____	_____	_____
_____ Add	_____	_____	_____
_____ Remove	_____	_____	_____
5) <u>N/A</u> Change	_____	_____	_____
_____ Add	_____	_____	_____
_____ Remove	_____	_____	_____
6) <u>N/A</u> Change	_____	_____	_____
_____ Add	_____	_____	_____
_____ Remove	_____	_____	_____

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

Article III: The specific purpose for which this corporation is organized is:

3 DOVE IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL, AND SCIENTIFIC PURPOSES,
INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT
QUALIFY AS EXEMPT ORGANIZATIONS DESCRIBED UNDER SECTION 501(C) (3) OF THE INTERNAL
REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE TAX CODES.

UPON THE DISSOLUTION OF THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE
EXEMPT PURPOSES WITHIN THE MEANINGS 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 PUBLIC PURPOSES. ANY
SUCH ASSETS NOT DISPOSED OF SHALL BE DISPOSED OF BY A COURT OF COMPETENT JURISDICTION
IN THE COUNTY WHICH THE PRINCIPAL OFFICE OF THE ORGANIZATION IS LOCATED, EXCLUSIVELY FOR
SUCH PURPOSES OR TO SUCH ORGANIZATION OR ORGANIZATIONS, AS SAID COURT SHALL DETERMINE,
WHICH ARE ORGANIZED AND OPERATED EXCLUSIVELY FOR SUCH PURPOSES.

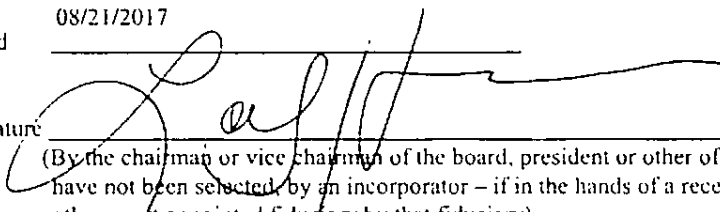
The date of each amendment(s) adoption: 08/21/2017, if other than the date this document was signed.

Effective date if applicable: 8/2/2017
(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.

Dated 08/21/2017
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)

LaShonda Henderson

(Typed or printed name of person signing)

Registered Agent

(Title of person signing)