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COVER LETTER

TO: Amendment Section
Division of Corporations

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FANAME OF CORPORATION:	AIRWEATHER GIV	VEBACK, INC.		
	0003445			
The enclosed Articles of Amendme	ent and fee are subm	itted for filing.		
Please return all correspondence co	ncerning this matter	to the following:		
WEBSTER CLARKE, JR.				
		Name of Contact Pe	rson)	
FAIRWEATHER GIVEBACK, IN	IC.			
	<u></u>	(Firm/ Company)	
1815 SOUTH FEDERAL HIGHW	'AY, STE.2			
		(Address)		
BOYNTON BEACH, FL 33435				
	(City/ State and Zip C	Code)	
WEBSTERMETRO@GMAIL.CO	М			
E-mail a	ddress: (to be used	for future annual rep	ort notification	1)
For further information concerning	this matter, please c	ail:		
WEBSTER CLARKE, JR		at	954	2001221
(Name	of Contact Person)	 ••• •	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following	ng amount made pay	able to the Florida D	epartment of	State:
	3.75 Filing Fee & Crtificate of Status	3\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certif Certif	D Filing Fee icate of Status icate of Status icate Copy itional Copy is used)

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

Articles of Amendment to Articles of Incorporation of

FAIRWEATHER GIVEBACK, INC.

(Name of Corporation	as currently f	led with the F	lorida Dept. of State)	····		
N17000003445						
(Docur	ment Number of	Corporation (i	f known)	· · ·		_
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, th	is <i>Florida Not</i>	For Profit Corporation a	dopts th	e fallow	/ing
A. If amending name, enter the new name of the	e corporation:					
N/A					The n	iew.
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		or "incorpore	ated" or the abbreviation	"Corp."	or "In	c. ''
B. Enter new principal office address, if applicable:		4				
(Principal office address MUST BE A STREET A			······································			
		,				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>) N//	4		SECI	20 8	_
				AHASSE	<u> </u>	_ <u>_</u> '
D. If amending the registered agent and/or regis	stered office ad	ldress in Flori	da, enter the name of the	e High	3	[
new registered agent and/or the new register					3	_
Name of New Registered Agent:	N/A			(OF)	왕	
			(Florida street address)			
New Registered Office Address:	;					
		, Florida				
	(0	City)	(Zip	Code)		
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			ept the obligations of the	position.		
_	Signa	ture of New Re	vistered 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add	<u>-,, -,</u>		
Remove			
5) Change		±	<u> </u>
Add			
Remove			
δ) Change			
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
PURPOSE: The purpose of this Not for Profit Corporation was organized exclusively for charitable, and educational
purposes under Section 501(c)3 of the Internal Revenue Code, or the corresponding section of any future Federal Tax Code.
DISSOLUTION. Upon the dissolution of the 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 the 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 purpose.

E. If amending or adding additional Articles, enter change(s) here:

	e date of each amendment(s) adoption:	, if other than th
Effe	ective date <u>if applicable</u> :	·
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ument's effective date on the Department of State's records.	be listed as the
Ado	option 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.	
	06/05/2018 Dated	
	Signature Delister Clarke Js.	_
	(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)	
	WEBSTER CLARKE, JR.	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	