## N17000006456

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



800356203118

12/18/20-+01020--009 \*\*35.00

66.39

FEB 0 2 7021

I ALBRITTON

()

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: Key West Past Pres	idents Foundation, Inc	2.	
DOCUMENT NUMBER:	N17000006456			
The enclosed Articles of An		mitted for filing.		
Please return all correspond	ence concerning this mat	ter to the following:		
Donald T Ebbitt				
		(Name of Contact Po	erson)	
Key West PPF, Inc.				
		(Firm/ Company	/)	
1413 6th St.				
		(Address)		
Key West, FL 33040	·•			
		(City/ State and Zip	Code)	
kwjcdon@gmail.com F	-mail address: (to be use	d for future annual rep	oort notification	1)
For further information cond	cerning this matter, please	e call:		
Donald T Ebbitt			305	849-9393
	(Name of Contact Person	1)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida	Department of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	D Filing Fee icate of Status ied Copy is issed)
Mailing A	Address	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

ion of Corporations Di

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Key West Past Presidents Foundation, Inc.	D 4 664 A		<del></del>
Name of Corporation as currently filed with the Florida	Dept. of State)		
N17000006456 (Document Num	ber of Corporation (if	`known)	
Pursuant to the provisions of section 617,1006, Florida Statumendment(s) to its Articles of Incorporation:		·	lowing
A. If amending name, enter the new name of the corpora	<u>ıtion:</u>		
Key West PPF, Inc.			he new
name must be distinguishable and contain the word "corpore" (Company" or "Co." may not be used in the name.	ation" or "incorpora	ed" or the abbreviation "Corp." or	'Inc.''
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>N/A</u>		
			2
			<u>-</u> ,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
			o :
			غن - <i>-</i>
). If amending the registered agent and/or registered of	lice address in Flaria	a enter the name of the	9
new registered agent and/or the new registered office		ia, there we hame of the	
Name of New Registered Agent: N/A			
		(Florida street address)	
New Registered Office Address:		(1 m) m	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am for		pt the obligations of the position.	
<del></del>	Signature of New Page	istered Avent. 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 Doc, 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 De           V         Mike Jo           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addit (attach additional shee		icles, enter change(s) here: (Be specific)	
N/A	<u>.</u>		
			<u>-</u>

• • •		
		<del></del>
		<del></del>
		<del></del>
		<del></del>
		<del></del>
		<u></u>
		<del></del>
The date of each amendment(s) adoptio date this document was signed.	n;	_, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block document's effective date on the Department.	es not meet the applicable statutory filing requirements, this date will not be ent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

Dated	November 4, 2020
Signatu	ce Donald T. Ebith
-	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Donald T. Ebbitt
	(Typed or printed name of person signing)

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