

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000355902 3)))



H190003559023ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Division of Corporations		
	Fax Number	: (850)617-6380	619
From:			_
	Account Name	: THERREL BAISDEN, LLP	•
	Account Number	: 120140000065	ت ا
	Phone	: (305)371-5758	
	Fax Number	: (305)371-3178	
			0
			C.
		s for this business entity to be used for future ngs. Enter only one email address please.**	5

	Email	Address:
--	-------	----------

ഗ്

F.d.

2019 DEC 10

COR AMND/RESTATE/CORRECT OR O/D RESIGN SECKINGER FOUNDATION CORPORATION Certificate of Status 0 Certified Copy 0

Amend

DEC 1 1 2019

I ALBRITTON

Electronic Filing Menu Corporate Filing Menu

Page Count

Estimated Charge

Help

04

\$35.00

#### Articles of Amendment to Articles of Incorporation of

#### SECKINGER FOUNDATION CORPORATION

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

N1700008566

۰.

(Document Number of Corporation (if known)

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 cornoration:

	The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u> )	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
-	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	ت 
-	

# 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:

New Registered Office Address:

(Florida street address)

(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

Page 1 of 4

12-10-19 4:39pm p. 3 of 5

## If amending the Officers and/or Directors, enter the title and name of each officer/director belog 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PT John Do Y Mike Jo SV Sally So	ones	
<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	DS	NANCY INGALLS	551 NW 77TH STREET BOCA RATON, FL 33497
× Remove			
2) Change Add	<u>0</u>	DAN BRABLICK	5900 SW 73RD STREET, STE 201 SOUTH MIAMI, FL 33143
3) Remove 3) Change Add Remove			
4) Change Add		<u> </u>	
Remove			
5) Change Add		· · · · · · · · · · · · · · · · · · ·	·
Remove			
6) Change Add			
Remove			<u>-</u>
E. If amending or addin	g additional Arti	Page 2 of 4 cles, enter_change(s) here:	
(allach additional shee			

······		<u></u>
	······································	
		<u> </u>
		,
· · · · ·		
	Page 3 of 4	
	·	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Planting data if applicables		
Effective date if applicable:	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this b document's offective date on the L	lock does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(9) wal.	

12-10-19 4:39pa p. 5 of 5 HIY000355902

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. ଘ

Dated

December 10, 2019 Signature

e <u>Contraction</u> (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)

PATRICIA SECKINGER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Page 4 of 4