N170000 10812

Office Use Only



100348991601



07/27/20--01053--018 **43.75

RECEIVED

JUL 2 4 2020

Amendlec

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION:	Foundation, Inc.
N17000010812	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning the	his matter to the following:
Collin Streetman	
	(Name of Contact Person)
A. E. Wood Foundation, Inc.	
	(Firm/ Company)
8001 Beaty Grove Drive	
	(Address)
Tampa, FL 33626-1602	
	(City/ State and Zip Code)
cesbcba@fullspectrumaba.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matte	r, please call:
Collin Streetman	813 382-2722 at
(Name of Contac	
Enclosed is a check for the following amount	made payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Certificate of	
Mailing Address Amendment Section	Street Address Amendment Section

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

A. E. Wood Foundation, Inc.

(Name of Corporation as currently filed with the Florida	a Dept. of State)	· ;;
N17000010812		
(Document Nun	nber of Corporation (if known)	·
Pursuant to the provisions of section 617,1006, Florida Statuamendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For Profit</i> C	Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the c	ubbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable:	8001 Beaty Grove Dr.	
(Principal office address MUST BE A STREET ADDRES	(<u>S</u>) _{Tampa, FL 33626-1602}	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8001 Beaty Grove Dr.	
	Tampa, FL 33626-1602	
D. If amending the registered agent and/or registered of	ffice address in Florida, enter th	e name of the
new registered agent and/or the new registered office		
Name of New Registered Agent:		
505 E J	ackson St., Suite 305	
	(Florida street	address)
<u>New Registered Office Address:</u> Tampa		33602
	(Ciţy)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am		ations of the position.
	Signature of New Registered Age	nt, 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>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add		_	
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
		onal Articles, enter change(s) here: essary). (Be specific)	
	·		

·		
,	<u>.</u>	
		
The date of each amendment(s) adoption: _date this document was signed.	, if other the	an the
Effective date if applicable: (no	more than 90 days after amendment file date)	
	ot meet the applicable statutory filing requirements, this date will not be listed as the	ne
Adoption of Amendment(s) (C	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes east for the amendment(s)	

	abers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.
Dated	07/20/2020
Signature	Cell Selly
	(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)
	Collin Streetman
	(Typed or printed name of person signing)
	President

(Title of person signing)