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of 4/12/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Hats On Hats Off		
DOCUMENT NUMBER: N18000001109		
The enclosed Articles of Amendment and fee are sub-	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Paige Beattie		
	(Name of Contact Person	1)
Hats On Hats Off		
	(Firm/ Company)	
4280 Galt Ocean Drive #28B		
	(Address)	
Fort Lauderdale, FL 33308		
	(City/ State and Zip Cod	0)
paige@hatsonhatsoff.com		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
	at	
(Name of Contact Person)) (Aı	ea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment 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)
Muiling Address	Stront	Address

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

Street Address
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

HATS ON HATS OFF, INC.

FILED

2022 HAR 28 PH 12: 0 I (Name of Corporation as currently filed with the Florida Dept. of State) N18000001109 (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 corporation: Donna Beattie Foundation, Inc. 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. NA B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: NA (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: (Florida street address) New Registered Office Address: , Florida _ (City) (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: X Change X Remove X Add	<u>PT</u> Y <u>SY</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add	 		
Remove			
6) Change Add			
Remove			
(attach additional shee	ts, if nece		
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The date of each amendment(s) adopt	tion:	ic.a. a a
date this document was signed.	non.	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Departs	loes not meet the applicable statutory filing requirements, this date will not be ment of State's records.	oe listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

Dated	03/24/22 Nain Buff
	By the charman 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)
	Paige Beattie
	Paige Beattie (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

adopted by the board of directors.