## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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.

(((H18000300430 3)))



H180003004303ABCT

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

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: M. FAEHNER, ESQ. LLC Account Name

Account Number : I20170000081 Phone : (727)443-5190 Fax Number : (727)474-9949

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:		
	~~~, ~, ~, ~, ~, .		

### COR AMND/RESTATE/CORRECT OR O/D RESIGN KENNETH JAFFE CHARITABLE FOUNDATION INC

Certificate of Status	0
Certified Copy	0
Page Count	0.5
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 1 5 223

# A SECTION OF AND PORTION OF A SECTION OF A S

### COVER LETTER

TO: Amendment Section
Division of Corporations

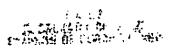
2018 OCT 17 PM 198 43

NAME OF CORPORATION:	E CHARITABLE FOUND	DATION IN	C .
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
Michael J. Faehner, Esq.			
	(Name of Contact Pers	on)	
M. Faehner, Esq. LLC			
	(Firm/ Company)		
600 Bypass Drive, Suite 100			
	(Address)		
Clearwater, FL 33764			
	(City/ State and Zip Co	de)	
filings@mfaehner.com			
E-mail address: (to be us	ed for future annual repor	t notification	n)
For further information concerning this matter, pleas	se call:		
Michael J. Fachner	(′ at	727)	443-5190
(Name of Contact Perso		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Dep	partment of	State:
\$35 Filing Fee Scrifficate of Status	& S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif (Addi	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address		t Address	
Amendment Section Division of Compositions		idment Section of Corne	

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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



別值 OCT 17 PH 中華

KENNETH JAFFE CHARITABLE FOUNDATION	INC.	
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)
N18000003504		
(Documen	Number of Corporation (if I	known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not F	or Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "c "Company" or "Co." may not he used in the name.	orporation" or "incorporate	The new d' or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	:	
(Principal office address <u>MUST BE A STREET ADD</u>		
	<del> </del>	<del></del>
		- · · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	<b>X</b> )	
	<del></del>	
	<del> </del>	
D. If amending the registered agent and/or register	ed 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:	(F	Florida street address)
trem nogisteren opplee naar ess.		
	. (City)	, Florida (Zip Code)
	. (City)	(Zip Code)
New Registered Agent's Signature, if changing Reging Reging Reging Registered agent.	stered Agent: I am familiar with and accep	t the obligations of the position.
	Signature of New Regis	stered 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>y</u> <u>M</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	JAFFE, JORDAN	113 FIRESTONE CIRCLE
X Add			ROSLYN, NY 11576
Remove			
2) X Change	D	DIXON, DIONNE	1290 GULF BLVD. #1701
Add			CLEARWATER, FL 33767
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			<del></del>
6) Change			
Add	<del>-</del>		
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
Nove	
	_
·	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
	<del></del>
	<u> </u>
	<del></del>
<del></del>	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONF)	
The amendment(s) was/were adopted by the members and the number of votes cast for the a was/were sufficient for approval.	mendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	i) was/were
Dated 10/16/18	
Signature	
(By the chairman or vice chairman of the board, president or other officer- bave not been selected, by an incorporator — if in the hands of a receiver, other court appointed fiduciary by that fiduciary)  KENNETH JAFFE	-if directors , trustee, or
TOTOLOGIA TRAFE	
(Typed or printed name of person signing)	- · <del></del>
DIRECTOR	
(Title of person signing)	<del></del>