N1800000 7939

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





700336616157

11/12/19==01046=+018 **35.00

FILED
20 JAN 27 PHIZ: 46
SECRE AND THE SAME
TALL ARTS SEED TO SERVICE.

JAN 28 267

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: DOT SOM	Family Foundation, Inc.
DOCUMENT NUMBER: NISC	00007939
The enclosed Articles of Amendment and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Tiffany Dotson	
	\
Dotson Family 6	TYOUR, INC.
' 1	
13713 SW 1705 +	Ter
	(Address)
Minmi, FL 3317	7
	(City/ State and Zip Code)
Queen Dot son gay	Mail. Com d for future annual report notification)
For further information concerning this matter, please	
Tiffany Dotson	at (786) 205-73102 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43,75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporation	Division of Corporations

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

Dotson family Foun	dation, Inc.
(Name of Corporation as currently filed with the Florida	a Dept. of State)
N18000	0)1939
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 617,1006. Florida Stat amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor Dotson Family Gr	DUP, Inc. The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address</u> , if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u>(SS)</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A ASS
D. If amending the registered agent and/or registered onew registered agent and/or the new registered offic	e address:
Name of New Registered Agent:	N/ A 5
New Registered Office Address:	(Florala street address)
	(City) Florida (Zip Code)
New Registered Agent's Signature, if changing Register Thereby accept the appointment as registered agent. I am	red Agent: familiar with and accept the obligations of the position.
	NA
	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>V</u> <u>Mik</u>	<u>i Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
F) Change Add	NA	N/A	N/A
Remove 2)ChangeAdd	NA	N/X	N/A
Remove 3) Remove — Add — Add	NA	N/A	JAN 2
Remove 4) Change Add	NA	NIA	NA
Remove 5) Change Add	NA	N/A	- 1 A E E E E E E E E E E E E E E E E E E
Remove 6) Change Add	NA	N/A	N/A
Remove E. If amending or ac (attach additional s		*	
		NA	
			· · · · · · · · · · · · · · · · · · ·

	J/A	
		-
	Page 3 of 4	20 JA SEUR
		F11
		TO THE STATE OF TH
The date of each amendment(s) adoption:	NA	D 5, if other than the
date this document was signed.	N/A	
	than 90 days after amendment file	
Note: If the date inserted in this block does not me document's effective date on the Department of Sta	te's records.	functions, this date will not be fisted as the
Adoption of Amendment(s) (CHEC	'K ONE)	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

20 JAN 27 SECHELARY	r
•••	-
PH IS: 41	<u> </u>

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

Dated

Signature

(By the chairman or vice chairman or 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 tiduciary)

(Typed or printed name of person signing)