1118000013396

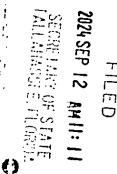
| (Re | questor's Name) | |
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| ☐ PICK-UP | MAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to F | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| THE LANDMARK FOUNDATION NAME OF CORPORATION: | N, INC. |
|---|--|
| N18000013396 DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee are submitted for filing | |
| Please return all correspondence concerning this matter to the following | ng: |
| David Heekin | |
| (Name of Cont | act Person) |
| The Landmark Foundation | |
| (Firm/ Cor | npany) |
| 7220 Financial Way | |
| (Addre | ss) |
| Jacksonville, FL 32259 | |
| (City/ State and | Zip Code) |
| david@landmarktitle.com | |
| E-mail address: (to be used for future annu | al report notification) |
| For further information concerning this matter, please call: | |
| Christine Solis | 904 717-9781 |
| (Name of Contact Person) | (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount made payable to the Flo | orida Department of State: |
| ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Certificate of Status Certified Cop (Additional centrologies) | y Certificate of Status |

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

THE LANDMARK FOUNDATION, INC.

| (Name of Corporation as currently filed with the Flor | rida Dept. of State) | | | |
|--|-------------------------------|-----------------------------|------------------|-------------|
| N18000013396 | | | . – | .,. |
| (Document ? | Number of Corporat | ion (if known) | | |
| Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation: | Statutes, this <i>Florida</i> | ı Not For Profit Corpord | ution adopts th | e following |
| A. If amending name, enter the new name of the corp | poration; | | | |
| | | | | The new |
| name must be distinguishable and contain the word "con" Company" or "Co." may not be used in the name. | rporation" or "inco | rporated" or the abbrevi | ation "Corp." | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR | <u>ESS</u>) | | | |
| | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) |) | | | |
| | | | SECRE | 2024 SE |
| D. If amending the registered agent and/or registered | | Florida, enter the name | of the | FILE |
| new registered agent and/or the new registered of | fice address: | | | ₹ 0 |
| Name of New Registered Agent: | | | - COM | =- |
| New Registered Office Address: | <u> </u> | (Florida street address) | O | |
| | | 1 | lorida | |
| | (City) | | (Zip Code) | |
| New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. To | | l accept the obligations of | of the position. | |
| | Signature of Nov | v Registered Agent if ch | maina | |

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 | PT John De V Mike Jo SV Sally St | ones | |
|--|--|---|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change Add | <u>D</u> | WEI TING W LI | 135 Durbin Station Court St. Johns, FL 32259 |
| X Remove | | | |
| 2) Change Add | <u>D</u> | JOHNNI N CAUSEY | 7220 Financial Way Jacksonville, FL 32259 |
| X Remove 3) Change | <u>D</u> | NICOLE L CARROLL | 7220 Financial Way jacksonville, FL 32259 |
| 4) Change Add | D | JOHN W DEMPS, JR | 7220 Financial Way jacksonville, FL 32259 |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional shee | | icles, enter change(s) here: (Be specific) | |
| | | | |
| | | | - |
| | | | |
| | | | |

| | 08/06/2024 |
|---------|--|
| Dated | |
| Signatu | |
| | (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) David Heekin |
| | (Typed or printed name of person signing) |
| | |
| | President/Director |
| | President/Director |