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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATIO		on Assistance Netw	ork, Inc.	FEI;	84-1840
DOCUMENT NUMBER: _	N1900000566	5			
The enclosed Articles of Ame	ndment and fee are sub	mitted for filing.			
Please return all corresponden	ce concerning this matt	er to the following:			
Patricia Lee					
	·	(Name of Contact P	erson)		
Tee Foundation Assistan	ce Network, Inc.				
		(Firm/ Compan	y)	· · · · · · · · · · · · · · · · · · ·	<del>*-1</del>
4126 NW 34th Drive					
· · · · · · · · · · · · · · · · · · ·		(Address)			
Gainesville, FL 32605					
		(City/ State and Zip	Code)		···
pj718@hotmail.com					
E-r	nail address: (to be used	l for future annual re	port notificatio	n)	
For further information concer	ning this matter, please	call:			
Patricia Lee			352	459-8331	
(1)	lume of Contact Person			(Daytime Telep	phone Number)
Enclosed is a check for the fol	lowing amount made pa	ayable to the Florida	Department of	State:	
■ \$35 Filing Fee E	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy) enclosed)	Certit is Certit	0 Filing Fee leate of Status led Copy tional Copy is osed)	
Mailing Ad Amendment Division of 0 P.O. Box 63	Section Corporations	Ar Di	reet Address mendment Sect vision of Corpo ne Centre of T	orations	

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Tee Foundation Assistance Network, Inc.

Name of Corporation as currently filed with the F	lorida Dept. of State)		
N19000005665			
(Documer	nt Number of Corporation (if know	лі)	
Pursuant to the provisions of section 617,1006, Florid imendment(s) to its Articles of Incorporation:	la Statutes, this Florida Not For P	rofit Corporation adopts the	e following
A. If amending name, enter the new name of the c	orporation:		
		at 14 . 1 at 1027 "	The new
name must be distinguishable and contain the word " Company" or "Co." may not be used in the name	corporation or incorporated o	r the antreviation Corp.	or Inc.
B. Enter new principal office address, if applicable			<del></del>
Principal office address <u>MUST BE A STREET AD</u>	<u>DRESS</u> )		
	<u></u>		
			_
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	·	
			_
	<u> </u>		_
). If amending the registered agent and/or registe		ter the name of the	
new registered agent and/or the new registered	office address:		
Name of New Registered Agent:			
Name Description of CMCs of Library	(Florid	u street address)	
New Registered Office Address:			
_		, Florida	
	(City)	(Zip Code)	282
New Registered Agent's Signature, if changing Res	gistered Agent:		æ 3±
hereby accept the appointment as registered agent.	I am familiar with and accept the	obligations of the position.	AR
			<b>2828 M</b> AR 30
			<del></del> _
	Signature of New Registered	Agent, if changing	<b>≥</b> ×
			•

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: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3 ) Change Add Remove		<del></del>	
4) Change Add			
Remove			<del> </del>
5) Change Add			
Remove			
6) Change Add		<u> </u>	
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	
Article IX. Upon the dissolute	on of this o	rganization, assets shall be distributed for one or more exe	mpt purposes within the meaning of section
501(c)(3) of the Internal Reve	nue Code,	or corresponding section of any future federal tax code, or	shall be distributed to the federal government,
or to a state or local governme	nt, for a pu	ublic purpose.	
	<del></del>		

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	March 26, 2020	
The date of each amendment(s) adoption: date this document was signed.	March 26, 2020	, if other than the
Effective date if applicable:	more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department	of meet the applicable statutory filing requirements, this date will not bound of State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

adopted by the bo	abers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	March 25, 2020
Dated	$\overline{\Omega}$
Signature	Tat Lee
_	(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)
	Patricia Lee
	(Typed or printed name of person signing)
	CEO

(Title of person signing)