## N19000013011

<del></del>	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
! 	PICK-UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certifi	ed Copies Certificates of Status
Spec	ial Instructions to Filing Officer:
	Office Use Only



900359842119

02/16/21--01008--022 \*\*35.00

SECRETARY OF STATE

bruend

## 1 4 2021 D CUSHING

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ON, INC	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the followi	uß:	,
SHEILA JACQUELINE BELZINCE		
(Name of Conta	act Person)	
AMELIA'S GARDEN FOUNDATION, INC		
(Firm/ Con	ipany)	
1240 NE 207 TERRACE		2021 SEC
(Addre	is)	RET EB
MIAMI, FL 33179		
(City/ State and	Zip Code)	新元 <b>32</b>   6
AMÉLIASGARDENFDN@GMAIL.COM		0: 28 STAI STAI
E-mail address: (to be used for future annu	al report notification)	
For further information concerning this matter, please call:		
SHELLA J. BELZINCE	305 519-6024	
(Name of Contact Person)	at(Area Code) (Daytime Telepho	one Number)
Enclosed is a check for the following amount made payable to the Flo	rida Department of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Certified Cop (Additional cenclosed)	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

AMELIA'S GARDEN FOUNDATION, INC

(Name of Corporation as currently filed with the Florid	da Dept. of State)
או   19000013011	4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
(Document Nu	imber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the followin
A. If amending name, enter the new name of the corpo	oration:
N/A	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. Enter new principal office address, if applicable:	1240 NE 207 TERRACE
(Principal office address <u>MUST BE A STREET ADDRE</u>	(SS) MIAMI, FL 33179
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1560 NE 207 TERRACE SUITE 402
	MIAMI, FL 33179
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office	
N/A Name of New Registered Agent:	
N/A	
New Registered Office Address:	(Florida street address)
N/A	, Florida <sup>N/A</sup>
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	
i nervoy accept the appointment as registered agent. I an	N/A
<u></u>	Signature of New Registered Agent, if changing

and address of each Offi (Attach additional sheets, Please note the officer/dir P =  President; V = Vice P	icer and/or Direct if necessary) rector title by the fi resident; T= Trea refired Financial (	irst letter of the office title: surer; S= Secretary; D= Director; TR= Trus Officer. If an officer/director holds more than	tee; C = Chairman or Clerk; CEQ = Chief
Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	ves the corporation	anner. Currently John Doe is listed as the P. n, Sally Smith is named the V and S. These sh SV as an Add.	ST and Mike Jones is listed as the V. There is ould be noted as John Doc. PT as a Change,
Example: X Change X Remove X Add	PT         John De           V         Mike Jo           SV         Şally Şr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) N/A Change Add Remove	<u>N/A</u>	<u>N/A</u>	N/A
2) NA Change Add	N/A	<u>N/A</u>	N/A
N/A Remove 3) Change Add Remove	<u>N/A</u>	N/A	
4) NIA Change Add Remove	<u>N/A</u>	<u>N/A</u>	N/A
5) NA Change	<u>N/A</u>	N/A	N/A
6) NA Change	<u>N/A</u>	N/A	N/A
E. If amending or adding (attach additional sheet)		cles, enter change(s) here: (Be specific)	
We are amending "Article	e III" to "The spec	ific purpose of which this corporation is orga-	nized are exclusively charitable and
		limited to, assisting with education and train	
		school programs, alternative education, family	
	•	nd other necessary social services as human no or one or more of the purposes as specified in	<u> </u>

	ch purposes, the making of distributions to organizations that qualify as exempt organizational Revenue Code of 1986, or corresponding section of any future federal taxcode.	<u> </u>
· · · · · · · · · · · · · · · · · · ·		
		_
'. 		
<del></del>		
1		<del></del> :
<del></del>		<u>                                       </u>
!		
1		<u> </u>
1		<u> </u>
<u> </u>		<u> </u> 
		<u> </u>
		<u> </u>
ı		
I		
The data of each amoundment of	N/A if out	ner than the
The date of each amendment(s) date this document was signed.	) adoption:	let than the
Effective date if applicable:	1/A	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.	d as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer was/were sufficient for appr	re adopted by the members and the number of votes east for the amendment(s) roval.	

Dated	February 1, 2021
Signatur	· Sober C
	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Sheila J. Belzince
	(Typed or printed name of person signing)
	CE 0
	(Title of person signing)

.