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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: | ALLES JAZZ SCHOI | ARSHIP FOUN | DATION INC. |
|--|--------------------------|--|---|
| DOCUMENT NUMBER: | | | |
| The enclosed Articles of Amendment and fee are | e submitted for filing. | | |
| Please return all correspondence concerning this | matter to the following | ğ: | |
| JOSEPH MACK | | | |
| | (Name of Contac | et Person) | |
| TAX-MACK USA INC. | | | |
| | (Firm/ Comp | pany) | 1000 |
| 9820 NW 7 AVE | | | |
| | (Address | :) | · · · · · · · · · · · · · · · · · · · |
| MIAMI, FLORIDA 33150 | | | |
| *** · · · · · · · · · · · · · · · · · · | (City/ State and 2 | Zip Code) | |
| TAXMACK9820@GMAIL.COM | | | |
| E-mail address: (to be | used for future annual | report notification | on) |
| For further information concerning this matter, p | lease call: | | |
| J. D. MACK | | 305 | 693-5195 |
| (Name of Contact Pe | erson) | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the following amount ma | ide payable to the Flori | da Department o | f State: |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of \$ta | | Certi oy is Certi (Add | 50 Filing Fee ficate of Status fied Copy litional Copy is osed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | | Street Address Amendment Sec Division of Corp The Centre of | ocrations |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 2, 2020

JD MACK TAX-MACK USA INC 9820 NW 7TH AVENUE MIAMI, FL 33150

SUBJECT: THE CHINA VALLES JAZZ SCHOLARSHIP FOUNDATION INC.

Ref. Number: N20000000816

We have received your document for THE CHINA VALLES JAZZ SCHOLARSHIP FOUNDATION INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 020A00021888

www.sunbiz.org

DOLLAR CO. A. DO DOV COOR WILL BLILL DOOR



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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 12, 2020

JD MACK TAX-MACK USA INC 9820 NW 7TH AVENUE MIAMI, FL 33150

SUBJECT: THE CHINA VALLES JAZZ SCHOLARSHIP FOUNDATION INC.

Ref. Number: N20000000816

We have received your document for THE CHINA VALLES JAZZ SCHOLARSHIP FOUNDATION INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 220A00020028

Articles of Amendment to Articles of Incorporation

| CHINAL VALLES JAZZ SCHOLARSHIP FOUNDATIO | N INC | |
|--|-----------------------------------|---|
| (Name of Corporation as currently filed with the Florida | Dept. of State) | |
| N20000000816 | | |
| (Document Nun | ber of Corporation (if kn | own) |
| Pursuant to the provisions of section 617,1006, Florida State amendment(s) to its Articles of Incorporation: | ites, this <i>Florida Not For</i> | Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corpor | ation: | |
| name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name. | ration" or "incorporated | The new or the abbreviation "Corp." or "Inc." |
| D. F-t | | F-3 |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES) | Σ) | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered office | | enter the name of the |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (Flo. | rida street address) |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J | | he obligations of the position. |
| | Signature of New Register | ed 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 | | Doe Jones Smith | |
|---|-----------------|--|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | D | ALICE DAY | 823 NW 104TH STREET MIAMI, FLORIDA 33150 |
| Z Remove | | | |
| 2) Change Add | SEC | CHRISTINA ALEXANDER | 821 NW 104TH STREET MIAMI, FLORIDA 33150 |
| Remove 3) Change Add Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change Add | | ·-· | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional shee) | | rticles, enter change(s) here:). (Be specific) | |
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| The date of each amendment(s) adoption date this document was signed. | : | , if other than the |
| Effective date if applicable: | no more than 90 days after amendment file date) | |
| | | to the Const |
| document's effective date on the Departmer | not meet the applicable statutory filing requirements, this date will not at of State's records. | oe fisted as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |

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

| 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 10 05 2020 Signature 571000 |
| (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) |
| JOSEPH MACK |
| (Typed or printed name of person signing) |
| (1) beg or bringen name or berson signing) |
| |
| TREASURER |
| (Title of person signing) |
| |