## N20000011323

(Req	juestor's Name)	<del>.</del>
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03/12/21--01015--022 \*\*43.75



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI		IILE FOUNDATION	INC	
	N20000011323			
DOCUMENT NUMBER:				
The enclosed Articles of Art	nendment and fee are sub-	mitted for filing.		
Please return all correspond	ence concerning this matte	er to the following:		
MARK A. STEVENS				
		(Name of Contact Pe	rrson)	
NOT APPLICABLE				
		(Firm/ Company	·)	
5401 HANCOCK RD				
		(Address)		
SOUTHWEST RANCHES	, FL 33330			
	<del></del>	(City/ State and Zip (	Code)	
frice@rvgco.cpa				
T I	E-mail address: (to be used	For future annual rep	ort notification	1)
For further information con	cerning this matter, please	call:		
LAWRENCE RICE		at	954	233-1767 EXT. 1007
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florida I	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi s Certifi	D Filing Fee locate of Status led Copy tional Copy is (sed)
Mailing .	<u>Address</u>	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment

Articles of Incorporation



TONY MOCNY SMILE FOUNDATION INC

2021 MAR 12 PM 6: 48

Name of Corporation as currently filed with the F	lorida Dept. of State) SERS	
N20000011323	TAL	LARY OF STATE
(Documer	nt Number of Corporation (if kr	nown) TOOLE, FL
Pursuant to the provisions of section 617,1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the c	orporation:	
		The new
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	corporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET AD</u>	<u>DRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	9 <b>Y</b> )	
and the second s	<u> </u>	
D. If amending the registered agent and/or registe		enter the name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent:		
_		
New Registered Office Address:	(Fle	orida street address)
······································		
	(City)	, Florida (Zip Code)
		(Zip Cont)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		the obligations of the position
тистему ассерьние арухинитель из тедіметей ацень.	т ат јаттаг жин ана ассерг	те откисть ој те ромиот.
	Signature of New Registe	ered 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>PT</u> <u>V</u> <u>SV</u>	John De Mike Jo Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change Add		_		
Remove				
2) Change Add		_		
Remove 3 ) Remove Add Remove		-		
4) Change Add		-		
Remove				
5) Change Add		-		
Remove				
6) Change Add		_		
Remove				
E. If amending or addin (attach additional shee			cles, enter change(s) here: (Be specific)	
Change#1: In ARTICLE	III The sp	ecific pu	rpose for which this corporation is oranized is	:: delete "TO PROVIDE DENTAL (
Change#2: In ARTICLE	III The sp	ecific pu	rpose for which this corporation is oranized is	s: please insert the
following language: SAII	ORGA!	NIZATIO	ON IS ORGANIZED EXCLUSIVELY FOR C	CHARITABLE, RELIGIOUS.
EDUCATIONAL, AND	SCIENTI	FIC PUR	RPOSES, INCLUDING, FOR SUCH PURPO	SES, THE MAKING OF
DISTRIBUTIONS TO O	RGANIZ	ATIONS	THAT OHALIFY AS EXEMPT ORGANIZ	ATIONS DESCRIBED UNDER

EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE.	
EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE.	RE
	OR
CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO TH	HE
FEDERAL GOVERNMENT, OR TO A STATE OR LOCAL GOVERNMENT, FOR A PUBLIC PURPOSE.	
	<del></del>
	- <del></del>
	<del></del>
	<del></del>
The date of each amendment(s) adoption: March 2, 2021	f other than th
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	

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

(CHECK ONE)

Adoption of Amendment(s)

Dated	03/04/2021
Signature	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	the chairman or aberchairman of the board, president or other officer-if director
	ive not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	·
	her court appointed fiduciary by that fiduciary)
	her court appointed fiduciary by that fiduciary)  MARK A. STEVENS