## N20000012287

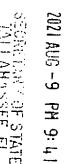
| (Requestor's Name)                      |  |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
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| Certified Copies Certificates of Status |  |  |  |  |
| Continuates of Status                   |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |
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08/09/21--01048--016 \*\*43.75







## COVER LETTER

N2000001728 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: 🐴\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Street Address Mailing Address

TO: Amendment Section

Division of Corporations

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 to

Articles of Incorporation of

|  | Articles of Incorporation of             | The second second                |
|--|--|----------------------------------|
| FAMIT FOUNDATIO  | $100 \pm 0.00$                           | FII.ED                           |
| Name of Corporation as currently filed with the  | Florida Dept. of State)                  | 2021 AUG -9 PH 9: 4              |
| N200000  | 12287                                    | \$30000                          |
| (Docume  | nt Number of Corporation (if known)      | MLLAHASSEE, FI                   |
| Pursuant to the provisions of section 617.1006, Floridament(s) to its Articles of Incorporation:     | da Statutes, this Florida Not For Profit | Corporation adopts the following |
| A. If amending name, enter the new name of the o   | corporation:                             |                                  |
|  |  | 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."   |
|  | le.                                      |                                  |
| B. Enter new principal office address, if applicable<br>Principal office address MUST BE A STREET AD |  |                                  |
| <u> </u>   |  |                                  |
|  |  |                                  |
| Enter new mailing address, if applicable:  |  |                                  |
| (Mailing address MAY BE A POST OFFICE Bo   | <u>OX</u> )                              |                                  |
|  |  |                                  |
|  |  |                                  |
|  |  |                                  |
| ). If amending the registered agent and/or registe   |  | e name of the                    |
| new registered agent and/or the new registered   | office address:                          |                                  |
| Name of New Registered Agent:  |  |                                  |
|  |  |                                  |
| _  | (Florida stree                           | t address)                       |
| New Registered Office Address:   |  |                                  |
| _  |  | , Florida                        |
|  | (City)                                   | (Zip Code)                       |
| New Registered Agent's Signature, if changing Re   |  |                                  |
| hereby accept the appointment as registered agent.   | I am familiar with and accept the oblig  | tations of the position.         |
|  |  |                                  |
|  | Signature of New Registered Age          | nt if changing                   |
|  | ingrature of New Registered Age.         | m, y chungung                    |

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:

the second of

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>Y</u> <u>SV</u> | John Do<br>Mike Jo<br>Sally Sr | one <u>s</u>   |                         |
|--|------------------------------|--------------------------------|--|-------------------------|
| Type of Action<br>(Check One)                      | <u>Title</u>                 |                                | <u>Name</u>  | <u>Addres</u> s         |
| 1) Change<br>Add                                   |                              | -                              |  |                         |
| Remove   |                              |                                |  |                         |
| 2) Change Add                                      |                              | -                              |  | . <u> </u>              |
| Remove 3 ) Change Add Remove                       |                              | -                              |  |                         |
| 4) Change Add                                      |                              | -                              |  |                         |
| Remove   |                              |                                |  |                         |
| 5) Change Add                                      |                              | -                              |  |                         |
| Remove   |                              |                                |  |                         |
| 6) Change Add                                      |                              | <del>-</del>                   |  |                         |
| Remove   |                              |                                |  |                         |
| E. If amending or addin<br>(attach additional shee |                              |                                | cles, enter change(s) here:<br>(Be specific)                                   |                         |
| Dissolution  | n                            | lai                            | use: FANIT FOUNDAT   | ION INC is              |
| organized ex                                       | clusin                       | ely                            | for charitable, religious, a   | educational, and        |
| sugniture (  | ) Octo                       | ses,                           | including, for such purpo<br>anizations that qualify<br>toon 501 (c)(3) of the | ses, the making of      |
| <u> distributions</u>                              | _to_                         | <u> </u>                       | anizations that qualifi  | as exempt organizations |
| described un                                       | der                          | Sec                            | hon 501 (c)(3) of the  | Internal Revenue        |

| Code or accessading section of an other folical tax  |
|--|
| Code, or corresponding section of any future fredered tax  |
|  |
| Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes  |
| within the meaning of Section 501(c)(3) of the   |
| Internal Revenue Gode, or corresponding section of   |
| any fiture, federal tax code, or shall be distributed  |
| to the federal government, or to a state or local opverment, for a public purpose  |
| government; tor a public purpose   |
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| The date of each amendment(s) adoption: JUV 23, 202 if other than the date this document was signed.   |
| Effective date if applicable: (no more than 90 days after amendment file date)   |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |
| Adoption of Amendment(s) (CHECK ONE)   |

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 7/23/21  |
| Signature  |
| (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 tiduciary by that fiduciary) |
| Arvis Lawson   |
| (Typed or printed name of person signing)  |
| President  |
| (Title of person signing)  |