N 20338

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
(, , , , , , , , , , , , , , , , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Kantner Foundation, Inc.					
DOCUMENT NUMBER: N20338					
The enclosed Articles of Amendment and fee are submi	itted for filing.				
Please return all correspondence concerning this matter	to the following:				
Samuel B. Silverman					
(:	Name of Contact Person)				
Kantner Foundation, Inc.					
	(Firm/ Company)				
2700 Donald Ross Road, Unit 404					
	(Address)				
Palm Beach Gardens, FL 33410					
(0	City/ State and Zip Code)				
samsilverman@gmail.com					
E-mail address: (to be used f	or future annual report notification)				
For further information concerning this matter, please ca	ali:				
Samuel B. Silverman	at 561 3865356				
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certified Copy (Additional Copy is Enclosed)				
Mailing Address	Street Address				
Amendment Section Amendment Section Division of Corporations Division of Corporations					
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				

THIS AMENDMENT WILL:

(1) UPDATE THE MAILING AND PRINCIPAL ADDRESS FOR THE KANTNER FOUNDATION INC.

Tallahassee, FL 32301

(2) UPDATE THE ADDRESS LISTED FOR SAMUEL B SILVERMAN

Articles of Amendment to Articles of Incorporation of

Kantner Foundation, Inc.	11 110 00	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
N20338		
(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corporation</i> adopts the following	
A. If amending name, enter the new name of the corporat	<u>ion:</u>	
	The new	
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:	954 Avenida Juan Ponce de Leon, Suite 205	
(Principal office address MUST BE A STREET ADDRESS	San Juan, Puerto Rico 00907	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	954 Avenida Juan Ponce de Leon, Suite 205	
	San Juan, Puerto Rico 00907	
D. If amending the registered agent and/or registered offic	ce address in Florida, enter the name of the	
new registered agent and/or the new registered office a		
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
	Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent. I am fai	niliar with and accept the obligations of the position.	
C	inn area of V no Docktory I to me if the color	
.54	ignature of New Registered 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>V</u> <u>Mike</u>	Doe 2 Jones 2 Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		SILVERMAN, SAMUEL B	268 Calle dos Hermanos
Add		UPDATE ADDRESS ONLY	Unit 5
Remove			San Juan, Puerto Rico 00907
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
o) Change			
Add			
Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
	·
<u></u>	
	

The date of each amendmen	t(s) adoptio	n: July 9, 2020	, if other than the
date this document was signed	1.		
Effective date <u>if applicable</u> : <u>\(\)</u>	July 9,	2020	
		(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the document of the date on the date of the date inserted in the date of the date of the date inserted in the date of		es not meet the applicable statutory filing requirements, this date will not ent of State's records.	ot be listed as the
Adoption of Amendment(s)		(<u>CHECK ONE</u>)	
The amendment(s) was/was/were sufficient for a	•	d by the members and the number of votes cast for the amendment(s)	
There are no members of adopted by the board of		ntitled to vote on the amendment(s). The amendment(s) was/were	
Dated July	y 9, 2020	<u> </u>	
Signature	Sasy		
(By th have	not been sel	or vice chairman of the board, president or other officer-if directors ected, by an incorporator – if in the hands of a receiver, trustee, or nted fiduciary by that fiduciary)	
S	amuel B	3. Silverman	
		(Typed or printed name of person signing)	
Р	resident	, Secretary, Trustee, Member	

(Title of person signing)