NA1000014352

(Re	equestor's Name)	
		. <u>.</u>
(Ad	ldress)	
(4)	Idress)	
(70	(die35)	
(Cit	ty/State/Zip/Phone	#)
•	, ,	
		MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	1

t



10 2021-01023-015 ++45.75

FILED

C. BRUMBLEY JAN 1 3 2022

		<u>COVER LETT</u>	ER	
TO: Amendment Section Division of Corporations				
NAME OF CORPORATION:	Immacula Alexandre	Foundation Incorpo	prated	
N210 DOCUMENT NUMBER:	00014352			
The enclosed Articles of Amendi	ment and fee are subn	nitted for filing.		
Please return all correspondence	concerning this matte	r to the following:		
Emma Clements				
		(Name of Contact P	erson)	
Resilia				
		(Firm/ Compan	y)	
7548 Plum Street				
		(Address)		
New Orleans, LA 70118				
	<u> </u>	(City/ State and Zip	Code)	
emma.clements@resilia.com				
E-mai	l address: (to be used	for future annual re	port notificatio	n) — — — — — — —
For further information concerning	ng this matter, please	cail:		
Emma Clements		al	504	952-5440
(Nar	ne of Contact Person)		(Area Code)	(Daytime Telephone Num
Enclosed is a check for the follow	ving amount made pa	yable to the Florida	Department of	State:
	43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
			reet Address	

.

Articles of Amendment to Articles of Incorporation of

Immacula Alexandre Foundation Incorporation

•

.

N2100001435			
(Document Ne	amber of Corporation (i	f known)	
Pursuant to the provisions of section 617.1006. Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not</i>	For Profit Corporation adopts the fo	llowing
A. If amending name, enter the new name of the corpo	pration:		
		7	he new
name must be distinguishable and contain the word "corp " <u>Company" or "Co." may not be used in the name</u> .	poration" or "incorpore	ited" or the abbreviation "Corp." or	"Inc."
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ESS</u>)		
	<u>.</u>	· · · · · · · · · · · · · · · · · · ·	~
			1021
C. Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		· · · ·	ີ <u>-</u>
		-	i F
		۳ <u>. ۲ ۲</u>	<u>י</u> ד
	·····	<u> </u>	<u>,</u> C
		da antar the name of the	
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		da, enter the name of the	
<u>neg registered agen and an the new registered and</u>			
Name of New Registered Agent:			
		(Florida street address)	
<u>New Registered Office Address</u> :			
		Florida	
	(Cirv)	(Zip Cade)	

<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

Signature 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> <u>e Jones</u> <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
3) Remove 3) Change Add Remove			
4) Change Add	·		
Remove			
5) Change Add	_,		
Remove			
6) Change Add			
Remove			
E. If amending or ad	ding additional .	Articles, enter change(s) here:	

(attach additional sheets, if necessary). (Be specific)

Upon the dissolution of this corporation, assets shall be distributed for one or more exempt purposes within the meaning of

Section 501(c)(3) of the Internal Revenue Code, or corresponding section, of any future federal tax code, or shall be

distributed to the federal government, or to the state or local government, for a public purpose.

•	·······
The date of each amendment(s) adoption:	if other than the
Effective date if applicable:	

<u>Note:</u> 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	12/20/2021
Signature	(ele
	By the chairman or vice chairman of the board,

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)

Camille Cesar

,

.

· .

(Typed or printed name of person signing)

President

(Title of person signing)