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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

S.A.N D. FOU: NAME OF CORPORATION:	NDATION, INC.		
N22000006080 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are			
Please return all correspondence concerning this	matter to the following:		
Lauren Roach			
	(Name of Contact	Person)	
	(Firm/ Compa	uny)	
3304 Manor Cove Circle			
	(Address)		
Riverview, FL 33578			
	(City/ State and Zi	p Code)	
sandfoundationinc@gmail.com			
	Fused for future annual	report notificatio	n)
For further information concerning this matter, p	lease call:		
Lauren Roach		813 at	458-6262
(Name of Contact Po	erson)	(Area Code)	
Enclosed is a check for the following amount ma	ide payable to the Florid	a Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta		Certi y is Certi (Add	0 Filing Fee Teate of Status Ted Copy Itional Copy is Osed)
<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Seconsision of Corp The Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

S.A.N.D. FOUNDATION, INC.		***				
Name of Corporation as currently filed with the	e Florida 1	Dept. of State)				• •
N22000006080						
(Docun	nent Numb	er of Corporation	ı (if known)	·		
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida N</i>	ot For Profit Corpo	oration adopts th	ie follov	ving
A. If amending name, enter the new name of the	e corporat	ion:				
name must be distinguishable and contain the word		ion" or "incorp	rrated" or the abbre	viation "Corp.	The o	
"Company" or "Co," may not be used in the nam.	<u>r.</u> ,					
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>					29248	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BQX</u>)			- 123 - 123 - 123 - 123 - 123 - 123	- <u>.</u> .	7 [] [] []
					<u>-ē</u>	
 If amending the registered agent and/or regi- new registered agent and/or the new register 			orida, enter the nan	ne of the		
Name of New Registered Agent:		Deese, Esq.				
	1228 E. 7	h Avenue, Suite	100			
New Registered Office Address:			(Florida street addre	Syl		
ach Resiliered Office Andress.	Tampa			. Florida <u></u> 33605		
		(City)		(Zip Code)		
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered n. Lam fån	Agent: niliar with and a	accept the öbligation.	s of the position	u.	
-	_ `` Sï	gnature of New I	Registered Agent, if a	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	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	TR	Stephanie Smigiel	2713 Garden Falls Drive Brandon, FL 33511
x Remove			-
2) A Change Add	<u>TS</u>	Gavl Bassette	12330 Hawkeve Point Place Riverview, FL 33578
Remove 3) Add Add Remove	*****		
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	··— ·— · ··· — · ····
			- · · · · -— ·

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20/02/02/
The date of each amendment(s) adoption: 08/20/3024, if other than the
date this document was signed.
The date of each amendment(s) adoption: 08/20/3034 , if other than the date this document was signed. Effective date if applicable: 400 days after amendment file date)
Effective date if applicable: 1005T 10, 2021
(no ture man 20 days after amenament file date)
<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.

3	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 5/20/24
	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 fiduciary by that fiduciary)
	Lauren Roach
	(Typed or printed name of person signing)
	President

(Title of person signing)