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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $_$ $ extstyle extstyle$	J FOR CHIA	rity c	ORPORATION	
DOCUMENT NUMBER: NEB 00	1102004			_
The enclosed Articles of Amendment and fo	e are submitted for filing	! .		
Please return all correspondence concerning	this matter to the follow	ing:		
Duyou Unsalan	(Name of Con	tact Person)		_
DLU FOR CHARITY	(Firm/ Co	mpany)		_
189 S. DRANCE ALE	YNE , S	UTE .1420 ess)		- -
ORLANDA FL 328	(City/ State an	d Zip Code)		—.
E-mail address: (to be used for future ann	ual report notification	on)	
For further information concerning this matt				ごり
Duy (a) INSBLAN (Name of Conta	ct Person)	at 407 (Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amour	t made payable to the Fl	orida Department of	State:	
□ \$35 Filing Fee □ \$43.75 Filing Certificate o		py Certi copy is Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Sec Division of Corp The Centre of 7 2415 N. Monro Tallahassee, FL	orations Fallahassee Je Street, Suite 810	

Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently filed with the Flor		
N23000002004	_	
(Document?	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit	Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "con "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the	abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	
		. ~;
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n	:
maning address MAT DE AT OST OTT TEE BOX		- 2
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		he name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida stre	et address)
		. Florida
	(Ciṇy	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I describe the appointment as registered agent.		gations of the position,
	Signature of New Registered Age	ent, 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.

	, and bury bonning		
Example: X Change X Remove X Add	PT John D V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change Add	Mirk	John C. UNSALAN	189 S OFFINGE AUE, 142 OFFINDO, FL 3280/
🔀 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 addir (attach additional shee		icles, enter change(s) here: (Be specific)	

	4.44	
		7
		- •
-		
		<u> </u>
		22
		J.
The date of each amendment(s) addate this document was signed.	option:	, if other than the
meetive date it appreaine.	tno more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirer partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were as was/were sufficient for approve	dopted by the members and the number of votes east for al.	the amendment(s)

· . . .

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)

(Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.