N2300007794

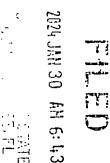
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COVER LETTER

TO: Amendment Section Division of Corporations

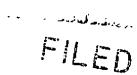
Tallahassee, FL 32314

SAMROSE FOU NAME OF CORPORATION:	NDATION INC			
N23000007794 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
HENRY K HAYFORD				
	(Name of Contact Person	n)		
	(Firm/ Company)			
14979 SW 132ND AVE				
	(Address)			
MIAMI, FL 33186				
	(City/ State and Zip Cod	le)		
hhayford@yahoo.com				
E-mail address: (to be u	sed for future annual report	notificatio	n)	
For further information concerning this matter, plea	ase call:			
HENRY HAYFORD	24 at		755-3475	
(Name of Contact Pers	son) (A)	rea Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Statu		Certif Certif	0 Filing Fee Teate of Status Ted Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio	Address dment Sect on of Corp- centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



SAMROSE FONDATION INC Name of Corporation as currently filed with the Florida Dept. of State)	2024 JAN 30	
	9711 30	
	_	AM 6: 4
N23000007794		
(Document Number of Corporation (if known)	TIME T	SIZ, FL
ursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Co</i> mendment(s) to its Articles of Incorporation:	orporation adopts the	following
. If amending name, enter the new name of the corporation:		
		The new
ame must be distinguishable and contain the word "corporation" or "incorporated" or the al Company" or "Co." may not be used in the name.	bbreviation "Corp."	or "Inc."
Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRESS</u>)		
	•	
		_
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
<u></u>		_
- 		
. If amending the registered agent and/or registered office address in Florida, enter the	name of the	
new registered agent and/or the new registered office address:		
No. 2N. 6 Dec. 1		
Name of New Registered Agent:	 -	
(Florida street a	uddress)	
New Registered Office Address:		
	Florida	
(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Registered Agent:		

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and	d 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>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	SECRE1	Kwao Gyesi Hayford	400 Elm St Apt 6A New Haven, Ct 06511
Remove			
2) × Change Add	TRESUI	Ernestina Awuah	14979 SW 132nd Ave Miami, FL 33186
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
ARTICLE III: The specif	ic purpose for wh	ich this corporation is organized is exclusively	y for charitable, educational, and
scientific purposes in the	US and Ghana, in	cluding, for such purposes, the making of dis	tributions to organizations that
qualify as exempt organiz	zations described t	under Section 501(c) (3) of the Internal Rever	nue Code, or corresponding section
of any future federal tax of	ode		
Upon the dissolution of the	he organization, as	ssets shall be distributed for one or more exen	apt purposes within the meaning of

Section 501 (c) (3) of the Internal revenue Code, or c	orresponding section of any future federal tax code, or shall be	distribu-
ted to the federal government, or to a state or local go	overnment, for a public purpose. Any such assets not disposed o	f shall
be disposed of by a court of competent jurisdiction in	the county in which the principal office of the organization is t	hen
located exclusively for such purposes or to such orga	nization or organizations, as said court shall determine, which a	re
organized and operated exclusively for such purposes	\$.	
		
		
		
	<u> </u>	
The date of each amendment(s) adoption: August : date this document was signed.	23. 2023	, if other than the
Effective date if applicable: August 23, 2023		
(no more tl.	ian 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet document's effective date on the Department of State	the applicable statutory filing requirements, this date will not be seconds.	e listed as the
Adoption of Amendment(s) (CHECK	ONE)	
☐ The amendment(s) was/were adopted by the mer was/were sufficient for approval.	nbers and the number of votes east for the amendment(s)	

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 01/23/2024
Signature (By the 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)
HENRY K HAYFORD
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)