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OF SEASON OF CORPORATION



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON:	QUES BRIDGE	BUILD	=R EDUC	CATION FOUNDATION IN	1C
DOCUMENT NUMBER:	N23000008873					
The enclosed Articles of Ar	nendment and fee are sub	omitted for filing.				
Please return all correspond	lence concerning this mat	ter to the following	; <u>:</u>			
Dr. Emery Ailes						
		(Name of Contac	t Person	ι)		
Ailes Paralegal Research	and Investigative LLC					
		(Firm/ Comp	any)			
PO Box 15748 Aviation L	.00р					2023
		(Address))			
Brooksville Florida 34604	ļ					2023 001 16
 ·		(City/ State and Z	ip Code	:)		 Τ
emeryailes@gmail.com						71 Z: 41
	-mail address: (to be use	d for future annual	report r	iotification	1)	_ _
For further information con	cerning this matter, please	e call:				
Dr. Emery Ailes			718	ļ	877-7344	
-	(Name of Contact Person	1)		ea Code)	(Daytime Telephone Num	ber)
Enclosed is a check for the	following amount made p	ayable to the Florid	la Depa	rtment of	State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing F Certified Copy (Additional cop enclosed)		Certifi Certifi	D Filing Fee leate of Status led Copy dional Copy is used)	
Mailing A	Address		Street A	<u>Address</u>		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

THE TAMPA BAY QUES BRIDGE BUILDER EDUCATION FOUNDATION INC

(Name of Corporation as currently filed with the Flori	ida Dept. of State)	
N23000008873	1 60	
(Document Ni	umber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida St amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation add	opts the following
A. If amending name, enter the new name of the corpo	oration:	
Garland V. Stewart Foundation Inc.		The new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "C	
B. Enter new principal office address, if applicable:	3415 Deleuil Ave Tampa Florida 33610	
(Principal office address MUST BE A STREET ADDRE	ESS)	
	-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 1093 TAMPA, FL 33601	2023 CCT 16 FM 12: 40
-	-	
		6
		 }
D. If amending the registered agent and/or registered	office address in Florida, enter the name of the	25
new registered agent and/or the new registered offi	ce address:	: <u>-</u>
Name of New Registered Agent:		2
	Deleuil Ave	
	(Florida street address)	
New Registered Office Address:		
Tamp	a, Florida 3	3610
	(City) (Zip Co	de)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am	red Agent: n familiar with and accept the obligations of the pos	sition.
	Signature of New Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and	l name of each officer/director being removed and title, name,
and address of each Officer and/or Director being added:	<u> </u>

(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 I V Mike . SV Sally S	Jones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change Add			
Remove			
2) Change Add			0/V(S10H
Remove 3) Change Add Remove			
4) Change Add			PH 12: 40
Remove			<u> </u>
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional sheet	g additional Art ts, if necessary).	ticles, enter change(s) here: (Be specific)	
Article III Purpose: The	mission of the I	Foundation is to support philanthropic, cha	ritable, and educational activities
		Omega Psi Phi Fraternity Incorporated an	-
Florida.	1	ger en	
			- ·

	10/10/23
Dated	
Signature	Dr Emy Miles
-	(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)
	Dr. Emery Ailes
	(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