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COVER LETTER

TO: Amendment Section Division of Corporations

BO NAME OF CORPORATION:	ATRIGHT-HESTON FOR	JNDATION INC		
N23000 DOCUMENT NUMBER:	014213			
The enclosed Articles of Amendmen	at and fee are submitted for	filing.		
Please return all correspondence con	cerning this matter to the f	following:		
Brian K. Boatright				
	(Name o	f Contact Person)		
	(Fin	m/ Company)	_	
156 SW Kelliche Gln				
		(Address)		
Lake City, Florida 32024				
	(City/ St	ate and Zip Code)		
brian@eyespike.com				
E-mail ad	dress: (to be used for futur	e annual report not	ification)	
For further information concerning the	his matter, please call;			
Brian K. Boatright		386 at	Č	984-0328
(Name o	of Contact Person)		Code) (Daytime Telephone Number)
Enclosed is a check for the following	g amount made payable to	the Florida Departi	nent of Sta	te:
■ \$35 Filing Fee □\$43.7 Certi	ificate of Status Certifi	ed Copy ional copy is	Certified	ie of Status Copy nal Copy is
Mailing Address Amendment Section			dress ent Section	

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

BOATRIGHT-HESTON FOUNDATION INC.

(Name of Corporation as currently filed with the Florida D	Dept. of State)
N23000014213	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
N/A	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office as	
N/A Name of New Registered Agent:	
Name of New Negisierea Agent.	· · · · · · · · · · · · · · · · · · ·
	(Florida street address)
<u>New Registered Office Address:</u>	
	(City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered . I hereby accept the appointment as registered agent. I am fan	
Sign	gnature 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: X Change X Remove X Add	PT John De V Mike Jo SV Sally Sr	<u>mes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	D	Matthew Heston	181 Ferrit Place Lake City, Florida 32025
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			<u> </u>
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	if other than the
N/A	
Effective date <u>if applicable</u> : (no more than 90 days after amendmen	
(no more than 90 days after amendmen	if file date)
Note: If the date inserted in this block does not meet the applicable statutory filir document's effective date on the Department of State's records.	ag requirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of 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 3-9-24
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)
Brian K. Boatright
(Typed or printed name of person signing)
President

(Title of person signing)