

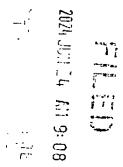
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	/ANESSA D JONI	ES FAMILY FOUN	DATI	ON INC		
	00001857					-
DOCUMENT NUMBER:				<del>_</del> _	<del></del>	<u> </u>
The enclosed Articles of Amendm	ent and fee are sub	mitted for filing.				
Please return all correspondence c	oncerning this mat	ter to the following:				
STEPHANIE JOHNSON-HART						
	<u> </u>	(Name of Contact	Person	1)	<u> </u>	
		(Firm/ Compa	ny)		<del></del>	
2016 N MYRTLE AVENUE				•		
		(Address)		<u> </u>		
JACKSONVILLE, FLORIDA 322	209					
	·	(City/ State and Zi	p Cod	e)		
JOHNSONS8@DUVALSCHOOI	LS.ORG					
E-mail	address: (to be use	d for future annual r	eport	notification	1)	
For further information concerning	this matter, please	call:				
STEPHANIE JOHNSON-HART		:	904 at	<b>L</b>	318-8143	
(Namo	of Contact Persor			ca Code)	(Daytime Telephor	ne Number)
Enclosed is a check for the followi	ng amount made p	ayable to the Florida	a Depa	urtment of	State:	
■ \$35 Filing Fee □\$4: Ce	3.75 Filing Fee & rtificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Addres	<u>s</u>	<u>s</u>	treet .	Address		

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, FI. 32303

## Articles of Amendment to Articles of Incorporation of

VANESSA D JONES FAMILY FOUNDATION INC

FILED

(Name of Corporation as currently filed with the Florida I	Dept. of State)
N24000001857	2024 JULE 4 All 9: 08
(Document Numb	per 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 corporat	ion:
NOT APPLICABLE	The new
name must be distinguishable and contain the word "corporal" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NOT APPLICABLE
	,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NOT APPLICABLE
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent: NOT AFF	PLICABLE
New Registered Office Address:	(Florida street address)
	Florida
-	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	
	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 Do V Mike Jo SV Sally Si	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) * Change Add	PTD	STEPHANIE JOHNSON-HART	2016 N MYRTLE AVE JACKSONVILLE, FL 32209
Remove			
2) × Change Add	DS	KAILA JOHNSON	2016 N MYRTLE AVE JACKSONVILLE, FL 32209
Remove 3) Remove Add Remove			
4) Change Add			
Remove  5) Change Add			
Remove 6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
Currently STEPHANIE Jo	OHNSON is listed	as the PDT. There is a change, STEPHANI	E JOHNSON-HART should be
listed as the PTD to reflec	t her full name as	it shows on her driver's license.	
Currently KAILA JOHSO	N is listed twice.	once as D and once as S. There is a change,	KAILA JOHSON should be
listed as DS.			

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The date of each amendment(s) adoption: NOT APPLICABLE	ther than the
NOT APPLICABLE	
Effective date if applicable:  (no more than 90 days after amendment file date)	

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

(CHECK ONE)

Adoption of Amendment(s)

Dated	MAY 29, 2024
Signatur	La belland
Ū	(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)
	STEPHANIE JOHNSON-HART
	(Typed or printed name of person signing)
	PRESIDENT/DIRECTOR/TREASURER
	(Title of person signing)