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COVER LETTER

TO: Amendment Section Division of Corporations

The Little LeginamE OF CORPORATION:	gs Big Heart Foundation, I	nc	
W24000080563			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	are submitted for filing.		
Please return all correspondence concerning th	is matter to the following:		
Kristen DeAndrade			
	(Name of Contact	Person)	
<u></u>	(Firm/ Compa	ny)	
1801 N Flagler Dr Apt 409			
	(Address)		
West Palm Beach, FL 33407			
	(City/ State and Zip	p Code)	
kristen@littlelegsbigheartfoundation.org			
E-mail address: (to	be used for future annual r	eport notification	n)
For further information concerning this matter	, please call:		
Kristen DeAndrade		617 at	8272199
(Name of Contact	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount t	nade payable to the Florida	a Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of \$	-	Certi y is Certi (Add	i0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section		Street Address Amendment Sec	tion

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 Little Legs Big Heart Foundation, Inc

FILED

(Name of Corporation as currently filed with the	Florida Dept. of State)	2024 JUH 17	Fi4 2. 10
W24000080563			111 2: 19
(Docum	nent Number of Corporation (if known)		
Pursuant to the provisions of section 617,1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this Florida Not For Profit	Corporation adopts th	e following
A. If amending name, enter the new name of the	corporation:		
			_The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		abbreviation "Corp.	or "Inc.
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>			
		·	
C. Enter new mailing address, if applicable; (Mailing address <u>MAY BE A POST OFFICE</u>)	BOX)		
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new register		ne name of the	
	Kristen DeAndrade		
Name of New Registered Agent:	1801 N Flagler Dr Apt 409		
<u>New Registered Office Address</u> :	(Florida stree	t address)	
	West Palm Beach	33407 , Florida	
	(City)	(Zip Code)	····
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	ı. I am familiar with and accept the obliş	gations of the position.	

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 Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	p	Little Legs Big Heart, LLC	
× Remove			
2) Change Add	<u>p</u>	Kristen DeAndrade	West Palm Beach, FL 33407
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	
			,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	<u></u>	<u> </u>	

The date of each amendment(s) adoption: date this document was signed. , if other than	the
6IAI2A	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	;
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	

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 Signature Signature
(if) the chalilitation 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)
Kristen E DeAndrade
(Typed or printed name of person signing)
President
(Title of person signing)

Same Comment