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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

THE DOUGLAS A NAME OF CORPORATION:	NDERSON SCHOOL	L OF THE	E ARTS FOU	NDATION, INC.
N28296 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub-	omitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
JACKIE CORNELIUS				
<u>.</u>	(Name of Contact P	erson)		
	(Firm/ Compan	ıy)		
1478 RIVERPLACE BLVD., #1606				
	(Address)			
JACKSONVILLE/FL 32207				
	(City/ State and Zip	Code)		
corneliusjackie2@gmail.com				
E-mail address: (to be use	ed for future annual re	eport notif	ication)	
For further information concerning this matter, pleas	se call:			
JACKIE CORNELIUS	a	904		962
(Name of Contact Perso		(Area C	ode) (Dayt	ime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	Departme	ent of State;	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status		is	\$52.50 Filing Certificate of Certified Cop (Additional C Enclosed)	Status Dy
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

THE DOUGLAS ANDERSON SCHOOL OF THE ARTS FOUNDATION, INC.

(Name of Corporation as currently filed with the Floris	da Dept. of State)		
N28296			
(Document Nu	imber of Corporation (if ki	nown)	
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not Fo	r Profit Corporation adopts th	ne following
A. If amending name, enter the new name of the corpo	gration:		
DEVELOPING ARTISTS FOUNDATION, INC.			The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated	" or the abbreviation "Corp,	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>SSS</u>)		
		•	
			— <u>:</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		: :	
		i	
			- :
	•	<u> </u>	·
D. If amending the registered agent and/or registered		enter the name of the	Č
new registered agent and/or the new registered offi	ce address:		
Name of New Registered Agent:	****		11.1.1.0
		orida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		the obligations of the position	ι,
	Cinnetum of Van Basim	ered Avent 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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change Add	D	_	MARK SHORSTEIN	1478 RIVERPLACE BLVD., #160c JACKSONVILLE, FL 32207
× Remove				
2) Change Add		_		
Remove 3) Change Add Remove		_		
4) Change Add		-		
Remove				
5) Change Add		_		
Remove				
6) Change Add		_		
Remove				
E. If amending or addir (attach additional shee			icles, enter change(s) here: (Be specific)	
			All pro-	
			And the state of t	

•				
				
				
	<u> </u>			
				
	· <u></u>			
			<u></u> _	
				
	· -			
	-			
				 -
The date of each amendment(s) adoption: date this document was signed.	AUGUST 27, 2024			_, if other than the
Effective date if applicable: AUGUST 27,	2024			
(no	2024 more than 90 days after a	mendment file date)		
Note: If the date inserted in this block does r document's effective date on the Department	not meet the applicable stat			be listed as the
Adoption of Amendment(s) (9	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.
	09/24/24 Dated
	Signature Lankie Cornelmo
	(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)
	JACKIE CORNELIUS
	(Typed or printed name of person signing)
	EXECUTIVE DIRECTOR
	(Title of person signing)