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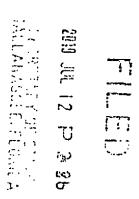
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON:	BOR FUND, INC.		
DOCUMENT NUMBER:	N92000000012			
The enclosed Articles of Am				
Please return all corresponde	ence concerning this matter	to the following:		
Monica Reed				
	(Name of Contact Per	rson)	··
"LOVE THY NEIGHBOR"	FUND, INC.			
		(Firm/ Company))	
PO Box 4030				
		(Address)		
Fort Lauderdale, FL 33338				
	(City/ State and Zip C	Code)	· · · · · · · · · · · · · · · · · · ·
monireed@bellsouth.net				
E	-mail address: (to be used:	for future annual repo	ort notification)
For further information conc	erning this matter, please c	all:		
Monica Reed		at _	305	987-9009
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida D	epartment of !	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	cate of Status led Copy lional Copy is
Mailing A	ddress	Str	eet Address	

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

"LOVE THY NEIGHBOR" FUND, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N92000000012 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: PO Box 4030 (Mailing address MAY BE A POST OFFICE BOX) Fort Lauderdale, FL 33338 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature 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 I V Mike S SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
i) Change	PD	ARNOLD P ABBOTT	6864 NW 25TH WAY
Add			FT LAUDERDALE, FL 33309
X Remove			
2) Change	P	JAMES LAPORTA	6864 NW 25TH WAY
X Add		-	FT LAUDERDALE, FL 33309
Remove			
3) Change	<u>v</u>	така аввотт	6864 NW 25TH WAY
X Add			FT LAUDERDALE, FL 33309
Remove			
4) Change	S	DR ARTHUR KANEV	405 N OCEAN BLVD. APT 1120
X Add			POMPANO BEACH, FL 33062
Remove			
5) X Change	СТ	MONICA REED	BOX 4030
Add			FORT LAUDERDALE, FL 33338
Remove			
δ) Change	М	REV DWAYNE BLACK JR	1400 N FEDERAL HWY
X Add			FORT LAUDERDALE, FL 33304
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
NA		
<u> </u>		
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	<u> </u>	
		<u></u>
		

	07/09/2019	
The date of each amendmen		, if other than the
date this document was signed		
Fee at 1 August 1993	07/09/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
☐ There are no members or adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
07/09 Dated	9/2019	
Signature	tenine head	
have	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
М	onica Reed	
<u> </u>	(Typed or printed name of person signing)	
Cł	hairman of the Board	
	(Title of person signing)	