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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Florescue Family F	oundation, Inc.		
	2000000438			
The enclosed Articles of Amend	ment and fee are subr	nitted for filing.		
Please return all correspondence	concerning this matte	er to the following:		
Audra Hughes, Paralegal				
		(Name of Contact l	Person)	
Ellis Law Group, P.L.				
		(Firm/ Compar	ny)	
4755 Technology Way, Suite	205			
		(Address)	-	
Boca Raton, FL 33431				
		(City/ State and Zip	Code)	
Debbie@ellis-law.com				
E-ma	il address: (to be used	for future annual re	eport notification	1)
For further information concerni	ng this matter, please	call:		
Audra Hughes		а	(561)	910-7550
(Nar	ne of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the follow	wing amount made pa	yable to the Florida	Department of	State:
\$35 Filing Fee S	43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	is Certifi	O Filing Fee cate of Status led Copy tional Copy is sed)
Mailing Addr	<u>ess</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, FL 32303

Articles of Amendment to Articles of Incorporation of

Florescue Family Foundation, Inc.

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N9200000438		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit</i> (Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
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	
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 office new registered agent and/or the new registered office a		e name of the
N/A	Jul 1331	
Name of New Registered Agent:	··· · · · · · · · · · · · · · · · · ·	
	(Florida street	address
New Registered Office Address:	(1 107) sad Sireer	aatressy
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan		ations of the position.
		- : (C-l
Sie	mature of New Registered Ages	nt 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change Add	DS	Gretchen Florescue	50 E. Sample Road Suite 400
Remove 2) Change Add	TR	Robert Marrone	50 E. Sample Road Suite 400
Remove 3) Change X Add Remove	DV	Dana M. Scheer	Pompano Beach, Florida 33064 50 E. Sample Road Suite 400 Pompano Beach, Florida 33064
4) Change X Add	<u>D</u>	Renate Forescue	50 E. Sample Road Suite 400
Remove 5) Change	D	Charles Weissman	Pompano Beach, Florida 33064 50 E. Sample Road Suite 400 Pompano Beach, Florida 33064
Remove 6) Change	D	Logan Delany	50 E. Sample Road Suite 400
E. If amending or additional sheet	ng additio	onal Articles, enter change(s) here: essary). (Be specific)	Pompano Beach. Florida 33064

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	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>D</u>	Seth E. Ellis	4755 Technology Way Suite 205
Remove			Boca Raton, Florida 33431
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional sheet	g additional Arti	cles, enter change(s) here: (Be specific)	

·		
		
		
		
		
		
		
		
The date of each amendment(s) adoption date this document was signed.	1:	_, if other than the
Effective date if applicable:		
Silvetive date <u>in applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Departme	s not meet the applicable statutory filing requirements, this date will not int of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

ha	the chairman or vice chairman of the board, president or other officer-if directors twe not been selected, by an incorporator – if in the hands of a receiver, trustee, or has appreciated fiduciary by that fiduciary)
Ot	her court appointed fiduciary by that fiduciary) Seth E. Ellis
	(Typed or printed name of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.