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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer;	

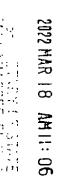
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A RAMSEY APR - 5 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	The Reilly Foundation, Inc.		
DOCUMENT NUMBER:			
The enclosed Articles of Amend	ment and fee are submitted for fi	ing.	
	concerning this matter to the foll	_	
James J. Reilly			
	(Name of C	ontact Person)	
The Reilly Foundation, Inc.			
	(Firm/	Сотрапу)	
1811 NW 88th Way			
	(Ad	dress)	
Coral Springs, Florida 33071			
	(City/ State	and Zip Code)	
info@kreul.com			
E-mai	address: (to be used for future ar	inual report notification)	
For further information concerning	g this matter, please call:		
Dwyn Berg			8035
(Nam	e of Contact Person)	(Area Code) (Day	rtime Telephone Number)
Enclosed is a check for the follow	ing amount made payable to the l	Florida Department of State:	
■ \$35 Filing Fee □\$4 Co	3.75 Filing Fee & S43.75 Filing Fee & Certified C (Additional enclosed)	opy Certificate o	f Status py
Mailing Addres	3 <u>\$</u>	Street 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

2022 MAR 18 AM 11:06

The Reilly Foundation, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) (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: (Mailing address MAY BE A POST OFFICE BOX) 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	<u>V</u> <u>Mil</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	Ð	Lorini, Michael	9872 nw 54th Place Coral Springs, FL 33076
2) Change Add	D	Magnuson, Henry	11049 NW 12th Dr. Coral Springs, FL 33071
Remove 3) Remove	<u>D</u>	Johnson, William	3960 NW 11th St. Coconut Creek, FL 33066
4) Change Add			
Remove 5) Change Add Remove		<u>-</u>	
6) Change Add			
Remove E. If amending or addi (attach additional she	ing additional A ets, if necessary,	articles, enter change(s) here:). (Be specific)	

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The date of each amendment(s) as date this document was signed.	loption:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	ck does not meet the applicable statutory filing requirements, this data will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approva	dopted by the members and the number of votes east for the amendment(s)	

.

Dated	3/14/2022
Signatu	
	(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)
	James J. Reilly
	• • • • • • • • • • • • • • • • • • • •