N9300005545

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		

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SEP 1

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

name of corporation: The Frank	and VERA FEROLA	Charitable Foundation, INC
DOCUMENT NUMBER: N 9.3 0000	05545	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
VERA FEROLA	(Name of Contact Person)	
	(Name of Contact Person)	
	(Firm/ Company)	
9858 Glades	Road St	E. 185
BOCA RATON,		
	ed for future annual report n	
For further information concerning this matter, pleas	se call:	
VERA FEROLA	#1 561	422-6349
(Name of Contact Person)	·	de & Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Depar	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		✓\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amenda Division	Address ment Section n of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flor	
N 93 000005545	diam (illiana —)
(Document Number of Corpora	tion (11 known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>on:</u>
N/A	Try
name must be distinguishable and contain the world "corporate	The new ion" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	/
D. Entan now principal office address if applicables	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/N
(Mailing address MAY BE A POST OFFICE BOX)	
	3 P. C. C.
	· ** .
D. If amending the registered agent and/or registered office	e address in Florida, enter the name of the
new registered agent and/or the new registered office ad	ldress:
Name of New Registered Agent:	A
7	
	Florida street address)
New Registered Office Address:	rioriaa sireel aaaress)
M/D	
	, Florida (Zip Code)
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fam	ultar with and accept the obligations of the position.
<i>N</i>	/ <i>H</i>
Signature of New Registe	ered Agent, if changing

Page 1 of 4

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 SV Sally	Jones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add		KAREN FEROLA	9858 Glades Rd Ste 185
Remove			BOCA RATON FL 33434
2) X Change	<u>Ys.D</u>	ROSALING GREENSTEIN	245 SwiNtON AVE. Throgsneck, BRONX
Add Remove			N.Y. 10465
3) Change	\mathcal{P}_{-}	FATHER GUY S. FIANO	BOCA RATON, FL.
Remove			33486
4) Change Add Remove	⊅	William McCanthy, Es	g. 2298 N.W. 2nd AVE SuitE 15 BOCA RATON, FL 33431
5) Change	D	TEBEREOU GREENSTEIN	245 Swinton AVE Throgsneck BRONY
Remove			N.Y. 10465
6)Change			
Add Remov€			
Kemova		.	

The date of each amendment(s) adoption: 9/6/12					
ne date of cach amendment(s) adoption,	-				
Effective date <u>if applicable</u> :					
(no more than 90 days after amendment file date;					
Adoption of Amendment(s) (<u>CHECK ONE</u>)					
The amendment(s) was/were adopted by the members and the number of votes cast 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 <u>SEpt. 6, 20/2</u>					
Signature lua tuola	_				
(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)					
VERA FERO LA					
(Typed or printed name of person signing)					
PRESIDENT					
(Title of person signing)					