

N96000002770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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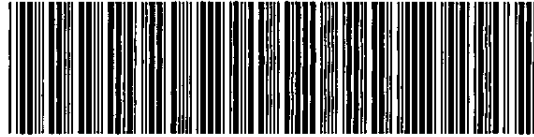
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7/10/09  
Aver



Law Offices of  
**EDWIN T. MULOCK, P.A.**

Board Certified Civil Trial Lawyer • Certified Circuit Court Mediator

June 29, 2009

Florida Department of State  
Division of Corporations  
Amendment Section  
P. O. Box 6327  
Tallahassee, FL 32314

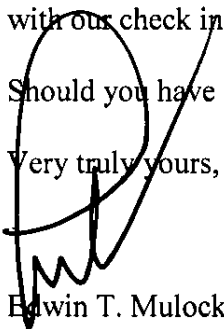
RE: Foundation for Dreams – Articles of Amendment to Articles of Incorporation

To Whom It May Concern:

Enclosed please find the Articles of Amendment to Articles of Incorporation removing Andrew Romines as President of the corporation and substituting the name of Edwin T. Mulock, together with our check in the amount of \$35.00 for filing same.

Should you have any questions or concerns, please do not hesitate to give me a call.

Very truly yours,

  
Edwin T. Mulock  
Board Certified Civil Trial Lawyer  
Telephone: (941) 748-2104  
Facsimile: (941) 748-6588  
edmulock@mulocklaw.com

ETM/bc

Enclosure



**Articles of Amendment  
To  
Articles of Incorporation  
Of**

**The Foundation For Dreams, Inc.**  
**(Name of Corporation as currently filed with the Florida Dept. of State)**

**N96000002110**  
**(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:**

N/A

The new 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: 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 office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

**Name of New Registered Agent:** N/A

**New Registered Office Address:** (Florida street address)  
(City), Florida (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

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*(Attach additional sheets, if necessary)*

N/A

**The date of each amendment(s) adoption:** 5/1/2009

*(date of adoption is required)*

**Effective date if applicable:** Immediately

*(no more than 90 days after amendment file date)*

**Adoption of Amendment(s) (CHECK ONE)**

☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendments(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 6/17/2009

Signature

(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)

Edwin T. Mulock

(Typed or printed name of person signing)

President

(Title of person signing)