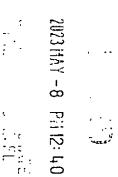
N970000 4586

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(City/State/21p/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2000)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



800408350948

05/08/29--01012--017 **35.00



Office Use Only

C/ 4/8/2023

COVER LETTER

, TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	FOUNDATION, INC.	
DOCUMENT N	UMBER:		
	cles of Amendment and fee are su	bmitted for filing.	
Please return all c	orrespondence concerning this ma	tter to the following:	
	JOHN S. BOHATCH		
		Name of Contact Person	
	BOHATCH & PENARAND	A, P.L.L.C.	
		Firm/ Company	
	7301 SW 57TH CT. #560		
		Address	<u> </u>
	SOUTH MIAMI, FL 33143		
		City/ State and Zip Code	
	JOHN@BPTRUSTS.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further inform	nation concerning this matter, pleas	se call:	
JOHN S. BOHA	ГСН, ESQ.	at (305) 666-1040 de & Daytime Telephone Number
N	ame of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fe	ee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

THE HURLBURT FOUNDATION, INC.

THE HU	RLBURT FOUNDATION, INC.	20221110 0 00
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	2023 HAY -8 PM 12: 4
	N97000006586	· 班(1) ·
(Document	Number of Corporation (if known)	College College
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For Profit Con</i>	rporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
	· . <u></u> .	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abo	breviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	9	
		
D. If amending the registered agent and/or registere	ed office address in Florida, enter the r	name of the
new registered agent and/or the new registered o	ffice address:	
Name of New Registered Agent:		
_	(2)	
New Registered Office Address:	(Florida street ad	uress)
		, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent. I		ions 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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>P</u>	W. FRANK HURLBURT, III	3630 BENEVA OAKS DRIVE SASASOTA, FL 34238
Remove 2) Change Add	<u>VP</u>	W. FRANK HURLBURT, III	3630 BENEVA OAKS DRIVE SASASOTA, FL 34238
X Remove 3) Change X Add Remove	VP	MICHAEL H. KLINE, JR.	3909 RESERVE DRIVE, APT 123 TALLAHASSEE, FL 32311
4) Change Add	<u>s</u>	SUNSHINE HURLBURT	2514 BAHIA VISTA STREET SARASOTA, FL 34239
Remove 5) Change	<u>T</u>	HERBERT G. KANARICK, CPA	1 EXECUTIVE BOULEVARD YONKERS, NW 10701
Remove 6) Change Add			
E. If amending or addi (attach additional she		icles, enter change(s) here: (Be specific)	

			
,			
			
			
		, , , , , , , , , , , , , , , , , , , ,	
			<u> </u>
	<u> </u>		· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·	
			
			
			<u> </u>
			
The date of each amendment(s) adoption date this document was signed.	: November	7, 2022	, if other than the
Effective date if applicable:	no more than 90 days after amendn		
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory f nt of State's records.	iling requirements, this date wi	II not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted l was/were sufficient for approval.	by the members and the number of	votes east for the amendment(s)

		are no members or members entitled to vote on the amendment(s). The amendment(s) was/were ed by the board of directors.
•	•	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)
		(Typed or printed name of person signing)
		DIRECTOR & VICE PRESIDENT : ARSIDENT ELECT (Title of person signing)