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COVER LETTER

TO: Amendment Section Division of Corporations

CANTONMEN NAME OF CORPORATION:	NT ROTARY CLUB FO	UNDATION. IN	RC
N98000001192			
DOCUMENT NUMBER:			-
The enclosed Articles of Amendment and fee ar	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
GREGORY SHOEMAKER			
	(Name of Contact	Person)	
	(Firm/ Compa	ny)	-
1765 E NINE MILE RD, STE 1 #217			
	(Address)		
PENSACOLA, FL 32514			
	(City/ State and Zi	p Code)	
GSHOEMAKER@WPSLAWYERS.COM			
E-mail address: (to be	e used for future annual r	eport notificatio	n)
For further information concerning this matter, p	olease call:		
GREGORY SHOEMAKER		850 at	516-2199
(Name of Contact P		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florid	a Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta		Certit r is Certit (Addi	0 Filing Fee ficate of Status fied Copy itional Copy is osed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

(Name of Corporation as currently filed with the	e Florida Dept. o	f State)	
CANTONMENT ROTARY CLUB FOUNDATION	ON, INC		
(Docum	ient Number of C	orporation (if known)	
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this	Florida Not For Profit Co	rporation adopts the following
A. If amending name, enter the new name of the	e corporation:		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	l "corporation" o	r "incorporated" or the ab	The new obreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ble:		Ei Z T
(Principal office address MUST BE A STREET A		<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered agent and/or the new registered Agent: Name of New Registered Agent:	stered office addi	E DEMAKER	PM 4: 27
		(Florida street ac	ldress)
New Registered Office Address:			
	PENSACOLA		, Florida
	(City	<i>'</i>	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			

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 D V Mike Jo SV Sally S	ones .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	ROXANNE S HOWELL	
x Remove			
2) Change Add	<u>P</u>	WILLIAM T LYFORD	
X Remove	<u>P</u>	TONY LEE	4952 WABASH PINE CR PACE, FL 32571
4) Change Add	D	GREGORY SHOEMAKER	8480 FOXTAIL LOOP PENSACOLA, FL 32526
Remove 5) Change Add			TALLAHAS!
Remove 6) Change Add			
Remove			#: 27
E. <u>If amending or addir</u> (attach additional shee		icles, enter change(s) here: (Be specific)	

		_
		Pi 8 T
		SS T
		FILEL 27
		(A. 1)
		
		<u> </u>
The date of each amendment(s) a	JULY 1, 2022	if other than the
date this document was signed.		
11 ;1	Y 1, 2022	
Effective date if applicable:		GL, Auto)
	(no more than 90 days after amendment)	не шил
Note: If the date inserted in this blodocument's effective date on the Do	ock does not meet the applicable statutory filing	requirements, this date will not be listed as the
accument seriective date on the Di	partment of State 5 records.	
Adoption of Amendment(s)	(CHECK ONE)	

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.	
Signature Signature By the chairman of 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)	
TONY LEE	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing) (Title of person signing) (Title of person signing)	-