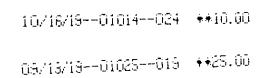
# N9800000 23//

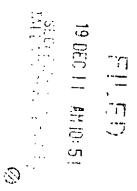
(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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#### COVER LETTER

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TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: THE HOME ONC	Paymond Brush Charlable Foundation,
MC. document number: <u>N98000</u> 02.	311
The enclosed Articles of Amendment and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the	following:
Erik Aı (Name	of Contact Person)
	tes and Dams
2070 hing	ling Blvd. (Address)
Sarasota,	FL 342377 State and Zip Code)
E-mail address: (to be used for fut	undacties demiscom
For further information concerning this matter, please call:	
(Name of Contact Person)	at <u>AHI 3(4.6-8010</u> (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	o the Florida Department of State:
(Ade	75 Filing Fee & S52.50 Filing Fee ified Copy Certificate of Status fitional copy is Certified Copy osed) (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation

# THE HUYNET AND MAYMOND BRUSH CHANGA HE FOUNDATION, IX.

## N98000002311

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the corpora	<u>ition:</u>		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." muy not be used in the name.	cation" or "incorporated	I" or the abbreviation "Corp."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Σ)		
	-		
C. Enter new mailing address, if applicable:		— '- 	<u></u>
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		<del>- []</del>	
		<u> </u>	
		:	<u> </u>
D. If amending the registered agent and/or registered of		enter the name of the	
new registered agent and/or the new registered office	address:	i	
Name of New Registered Agent:			
	·F	lorida street address)	<del></del>
New Registered Office Address:			
		. Florida	
<del></del>	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registere	d Avent		
Thereby accept the appointment as registered agent - I am j	familiar with and accept	the obligations of the position.	

### 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>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change	DS	Gary Landsman	1991 Main Street Box 183
Add			Sarasota, FL 34236
X Remove			
2) Change	DV	Steven C. Band	1991 Main Street, Suite 283
Add			Surasota, FL 34236
X Remove			
3 ) Change	DS	George Dramis	2070 Ringling Blvd
X Add			Sarasota, FL 34237
Remove			T Y
4) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
		-
	<del></del>	
11		
	<u>⊇</u> %	
		19
	••	F: 0:
	<del></del>	5
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	<u></u>	

The date of each amendment(s) a date this document was signed.	idoption:	, if our	ier than i
Effective date <u>if applicable</u> :			
	(no more than 90 days after amendment file date)		
Note: If the date inserted in this bl document's effective date on the D	lock does not meet the applicable statutory filing requirements, this date will no department of State's records.	ot be listed	as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
☐ The amendment(s) was/were a was/were sufficient for approx	adopted by the members and the number of votes east for the amendment(s) val.		
There are no members or men adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were stors.		
Dated	12/0/19/1		
have not b	sirman or vice chairman of the board, president or other officer-if directors seen selected, by an incorporator – if in the hands of a receiver, trustee, or		
other cour	t appointed fiduciary by that fiduciary)	19 DEC 1	77
	(Typed or printed name of person signing)	· *** 5	in D
	(Title of person signing)	· <u>-</u>	