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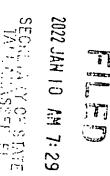
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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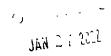
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: The Children of Love WiNOS de Amor) Foundation, Inc. N99000000<u>2750</u> DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Florida 32820 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dori SMPatalano
(Name of Contact Person) at (407) 273 -0753 Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

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

Enclosed)

(Additional Copy is

Articles of Amendment

to

Article	es of Incorporation
The Children of Love (N Name of Corporation as currently filed with the Florida	lings to Amoral Foundation 3
Name of Corporation as currently filed with the Florida	Dept. of State)
N99000002750	SECRETARY OF STATE ber of Corporation (if known) SSIF F
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ition:
	The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	4921 Headlee Drive Orlando, Florida 32822
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Orlando, Florida 32822
	·
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	-A/A
D. If amending the registered agent and/or registered offi	ice address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
ten negasigi en Office nuaress.	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	1 Agent:
I hereby accept the appointment as registered agent. I am fa	imiliar with and accept the obligations 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: X Change X Remove X Add	PT John D V Mike John SV SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	P	Doris M. Patalano	4921 Headlee Drive Orlando F1 32822
Remove 2) Change Add	<u>_</u>	Frank Patalano	4921 Headlee Drive Orlando FL 32822
Remove Change Add Remove	T	Donna Peterpaul	1303 Cole Road Orlando F1 32823
4)ChangeAdd	T	Melvin Santiago	122 Rachel Lin Lane
Remove			Saint Cloud FL 34771
5) Change Add		 	
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	
	N/	A-	

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The date of each amendment(s) adoption	on:			·	. if other than the
date this document was signed.					
Effective date if applicable:					
	(no more than 90 day	s after amendment	file date)		

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's 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.
Dated New 24 - 2021 Signature Dris M Paleluso
(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)
DORLS M PATALAND (Typed or printed name of person signing)
THE SIDENT (Title of person signing)

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