P01000114230

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Amend 10/12/14

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Manna Foundation, Inc. DOCUMENT NUMBER: P01000114230 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bruce R. Abernethy, Jr. Name of Contact Person Bruce R. Abernethy, Jr., P.A. 130 S. Indian River Drive, Suite 201 Address Fort Pierce, FL 34950 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: $\underset{\text{at (}}{\underbrace{772}}\underset{\text{Area Code & Daytime Telephone Number}}{\underbrace{489\text{-}4901}}$ Bruce R. Abernethy, Jr. Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Manna Foundation, Inc.

(Name of Corporation as	currently filed with the Flo	orida Dept. of State)	_ `
P01000114230			
· (Documen	t Number of Corporation (if	known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
	<u>'</u>		The new
	ation "Corp," "Inc," or "C	" "company," or "incorporated" or the of "incorporation name must of A professional corporation name must	
		 N/A	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
······································	,		<u> </u>
			_
C. Enter new mailing address, if appli	nabla:	N1/A	
(Mailing address MAY BE A POST		N/A	-
			_
			_
D. If amending the registered agent an	d/or registered office addre	ss in Florida, enter the name of the	
new registered agent and/or the nev			
Name of New Registered Agent	Sylvie Licausi		
	2704 Serenity C		
	(Florida stree	,	•
New Registered Office Address:	Fort Pierce	, Florida 34981	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:		
		ith and accept the obligations of the position.	•
Suli	re Li Caur	,	
Si	gnature of New Registered As	gent, 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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	Title	Name	Address
1) Change	PD	Paul Licausi, Jr.	2704 Serenity Circle
Add			Fort Pierce, FL 34981
Remove			
2) Change	PD	Sylvie Licausi	2704 Serenity Circle
Add			Fort Pierce, FL 34981
Remove			
3) Change		·	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			. <u>.</u>
Add			
Remove			
6) Change			
Add			•
Remove			,

If amending or adding additiona (Attach additional sheets, if necessary)	ary). (Be specific)
/A	
`	
	The state of the s
If an amendment provides for an	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the	e amendment if not contained in the amendment itself:
(if not applicable, indicate N	7A)
I/A	,
	
-	

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
Signature Sy	ector, president or other officer – if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court	
	d fiduciary by that fiduciary)	
S	Sylvie Licausi	
_	(Typed or printed name of person signing)	
P	President	,
-	(Title of person signing)	 .