P14000080149

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: 800FORFUNDS, INC. DOCUMENT NUMBER: P14000080149 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DIANE C. HUNT Name of Contact Person 800FORFUNDS Firm/ Company 3808 SE JEFFERSON COURT Address **STUART, FL 34997** City/ State and Zip Code FORFUNDS@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954 5514864

Area Code & Daytime Telephone Number Bruce Dorfman 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 Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

Mailing Address

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



Articles of Amendment to Articles of Incorporation of

800FORFUNDS, INC.		
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
P14000080149		
(Document Number of Corporation (if k	(nown)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s)	to
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	3808 SE JEFFERSON COURT	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	STUART, FL 34997	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
Name of New Kegistered Agent		
(Florida stree	t address)	
New Registered Office Address:	, Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.	
Signature of New Registered Ag	ent, 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S√	DIANE C.HUNT	3808 SE JEFFERSON COLUR
Add		·	STUART, FL 34997
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(At	f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
		- "
		
_		
<u>If</u>	f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
·		

The date of each amendment(s) adoption:	, if other than the
DEATHD MA COAA	
Effective date if applicable: (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated DECEMBER 4, C014	
Signature Ken Lienso	
(By a director, president or other officer – if directors or officers have not been	_
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
CHERI PIERSON	
(Typed or printed name of person signing)	_
DIRECTOR	
(Title of person signing)	_