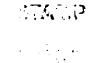
State of Rhode Island and Pro Department of State Articles of Amendment DOMESTIC Non-Profit Corpo → Filing Fee: \$10.00		s RECEIVED Prvices Divistor RETARY OF STA CURPORATIONS DI 2010 AUG 27 PM 3: 7	SECRETARY OF STATE CORPORATIONS DIV	
Pursuant to the provisions of RIGL <u>7-6-40</u> , the undersigned corporation adopts the following Articles of Amendment to its Articles of Incorporation:			ng Articles	
1. Entity ID Number:	2. The name of th	e corporation is:		
959409	LEONARD E. WALKER SR. GOLF TOURNAMENT			
3. If the entity's name is changing, state the new name: WALKER FAMILY SCHOLRSHIP FUND				
		Check	k the box to indicate no change	
4. If the period of its duration is changing complete the following section: CHECK ONE BOX ONLY				
Perpetual (on-going)				
Date certain for dissolution Check the box to indicate no change				
5. If the entity's purpose is changir transacted in the State of Rhode Islan	-	Illowing section: *The new purpose sho	uld include ALL activity to be	
Check the box to indicate an attac	hment	Check	k the box to indicate no change	~
6. If the number of directors is incr state the number of directors in thi		ing (not less than 3 directors),		
*List ALL directors as of this amendm				-
NAME	ADDRES	S	· · · · · · · · · · · · · · · · · · ·	
Check the box to indicate an attac		Check	k the box to indicate no change	<u> </u>

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov





FORM 201 - Revised: 11/2017

7. If adding or amending additional provisions, complete the following section: CHANGE OFFICER'S NAMES TO: LEONARD E. WALKER, JR. PRESIDENT, AND FRANK R. WALKER, III, VICE PRESIDENT				
	Check the box to indicate no change			
8. The amendment was adopted in the following manner: CHECK ONE BOX ONLY	f 			
The amendment was adopted at a meeting of the members held on <u>JUNE 17, 2017</u> , at which meeting a quorum was present, and the amendment received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.				
The amendment was adopted by a consent in writing on, signed by all members entitled to vote with respect thereto.				
The amendment was adopted at a meeting of the Board of Directors held o received the vote of a majority of the directors in office, there being no merr thereto.	on, and, here a set to vote with respect			
9. Date when these Articles of Amendment will be effective: CHECK ONE BOX ON	LY			
✓ Date received (Upon filing)				
Later effective date (Date must be no more than 30 days from the date of filing)				
Under penalty of perjury, I declare and affirm that I have examined these Articles of accompanying attachments, and that all statements contained herein are true and c				
Type or Print the Name of the Non-Profit Corporation				
WALKER FAMILY SCHOLARSHIP FUND				
Type or Print Name of the President OR Vice President	Date			
FRANK R. WALKER III	7/1/18			
Signature of President OR Vice President	TT.			
Type or Print Name of the Secretary I OR Assistant Secretary	Date			
ARLINE L. WALKER	7/. /18			
Signature of the Secretary OR Assistant Secretary				
Alene J Walker SIGN DOCUMENT HERE				

TWO SIGNATURES ARE REQUIRED



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island

and Providence Plantations, hereby certify that this document, duly executed in

accordance with the provisions of Title 7 of the General Laws of Rhode Island, as

amended, has been filed in this office on this day:

August 27, 2018 03:18 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

