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## **COVER LETTER**

TÓ: Amendment Section Division of Corporations		
NAME OF CORPORATION: America's	Female Fi	refighters, Inc
DOCUMENT NUMBER: NO400001	776	
The enclosed Articles of Amendment and fee are subr	mitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Laura Kupinski		
	(Name of Contact Persor	n)
America's Female Firefig	hters, Inc.	
	(Firm/ Company)	
15757 Pines Blvd. #401		
	(Address)	
Pembroke Pines, FL 330	)27	
	(City/ State and Zip Code	e)
kupinskilk@aol.co	om	
E-mail address: (to be used	for future annual report i	notification)
For further information concerning this matter, please	call:	
Laura Kupinski	at (954	650-7941  ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	ertment of State:
\$35 Filing Fee \$\Bigs\\$43.75 Filing Fee \$\&\Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

# Mailing Address

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

Later British College

#### Street Address

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

## Articles of Amendment to Articles of Incorporation of

America's Female Firefig	ghters, Inc.			
(Name of Corporation as current)	y filed with the F	lorida Dept. of State)		,
N0400001776				_
(Documen	t Number of Corpo	oration (if known)		
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporate		ites, this Florida Not For	Profit Corporation adopts the	following
A. If amending name, enter the new na	me of the corpora	ttion:		
n/a				_The new
name must be distinguishable and contain "Company" or "Co." may not be used in	•	ration" or "incorporated	" or the abbreviation "Corp." o	or "Inc."
		n/a		
B. Enter new principal office address, i (Principal office address MUST BE A ST		Σ) n/a	***	•
		n/a		12 t
		1174	,	=======================================
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		n/a	シッ・ シハ・ (計・)	FILED 24 AM
(	,	n/a	无	
		n/a		i de Gri
D. If amending the registered agent and			enter the name of the	· 🕠
new registered agent and/or the new	· ·	address:		
Name of New Registered Agent:	n/a			
	n/a			
New Registered Office Address:		(Florida street address)		
	n/a		, <sub>Florida</sub> n/a	
	(City	v)	(Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as registe			the obligations of the position.	
Sie	nature of New Reg	ristered Agent, if changing	g	

Page 1 of 4

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 <math>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)	<u>Title</u>	Name	<u>Addres</u> s
Change  X Add  Remove	D	Chris Brown	15757 Pines Blvd. #401 Pembroke Pines, FL 33027
2) Change Add Remove			
3)ChangeAddRemove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

2. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
n/a	
· · · · · · · · · · · · · · · · · · ·	
	The state of the s
<u> </u>	

The date of each amendment(s) ad	option: May 1, 2012
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adwas/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s).
There are no members or membadopted by the board of directors	pers entitled to vote on the amendment(s). The amendment(s) was/were pers.
Dated May 1,	2012 2012
(By the chair have not bee	manor vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
Laura Kup	inski
	(Typed or printed name of person signing)
President	
***************************************	(Title of person signing)