N10000009246

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(Address)					
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3ECRETARY OF STATE

APR 1 7 2012 T. BROWN

COVER LETTER

Division of Corporations Over Money Consulting, **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigsup \$\\$43.75 Filing Fee & \$\Bigsup \$\\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed)

Mailing Address

TO: Amendment Section

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	
Mind Over Money Consulting, Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
N1000000 9246.	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
mind Over Money, Inc. The new	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."	
"Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	•
C. Enter new mailing address, if applicable:	! س
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address;	
Name of New Registered Agent: N /A	
(Florida street 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 and accept the obligations of the position.	
\mathcal{N}/\mathcal{A}	
Signature of New Registered Agent, if changing	
·	

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)	Title	Name		Address
1) Change Add Remove		· -	N/A	
2) Change Add Remove	<u></u>		N/A	
3) Change Add Remove			N/A	
4) Change Add Remove			N/ρ	
5) Change Add Remove			N/A	
6) Change Add Remove	-		NA	

(attach additional sheets, if n	tional Articles, enter change(s) ecessary). (Be specific)	<u>) here</u> :	
	N/A		
	,		
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			•
	<u>-</u>	,	

The date of each amendment(s) adoption: 4/17/2012							
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 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 Dated							
Signature Karen Belles a 7							
(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)							
Karen Gillispie							
(Typed or printed name of person signing) Executive Director							
(Title of person signing)							