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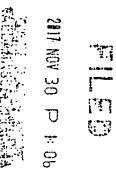
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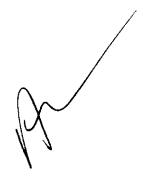


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CEC 0 1 2017 T. LENAYEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:Survive	e & Thriu	e	
DOCUMENT NUMBER:	1728		
The enclosed Articles of Amendment and fee are submitt	ted for filing.		
Please return all correspondence concerning this matter to	o the following:		
Hendy Campbell	lame of Contact Pers		
, (и	lame of Contact Pers	on)	
Survive + Thrive			
	(Firm/ Company)		· · · · · · · · · · · · · · · · · · ·
527 915+ Ave N			
•	(Address)		
Nados FL 34108			
, (C)	ity/ State and Zip Co	ode)	
Wendy a Survive Thrue Ja E-mail address: (to be used for	act orcy	1 notification	
`		t notineation	,
For further information concerning this matter, please cal	11:		
Mendy Campbell (Name of Contact Person)	at ((868	273-6354
(Name of Contact Person)	()	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payab	ble to the Florida De	partment of S	tate:
(\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
B.6-101 A.3.3	C+		

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

(Name of Corporation as currently filed with the Florida Dept. of State 2011 NOV NOCOCO 9738 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the mendment(s) to its Articles of Incorporation:	
(Document Number of Corporation (if known) The Little For Profit Corporation adopts the nendment(s) to its Articles of Incorporation:	
(Document Number of Corporation (if known) Figure 15. 1006, Florida Statutes, this Florida Not For Profit Corporation adopts the the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the theorem of the provision o	30 P 1:
resuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the the thin the section of	
nendment(s) to its Articles of Incorporation:	Society Control
The state of the s	ne following
If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. Company" or "Co." may not be used in the name.	" or "Inc."
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
 	
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:	
(Florida street address) New Registered Office Address;	
(City) Florida (Zip Code)	
(Cuy) (Zip Code)	
ew Registered Agent's Signature, if changing Registered Agent:	_
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	1.
Signature of New Registered Agent, 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 X Remove X Add	PT John I V Mike S SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	<u> </u>	Melissa Roth	20-11 Atwater Ave. 20s Angeles, CA 90039-2401
2) Change Add Remove	<u>S</u> _	Tracey England	27304 Buccaneer Drue Bonita Springs, FL 34135
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

The date of each amendment(s)	adoption:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the l	block does not meet the applicable statutory filing requirements, this date volument of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment oval.	(s)
There are no members or me adopted by the board of dire	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
Dated//	26/2017	
Signature	Dim Carpell	
have not	airman or viee chairman of the board, president or other officer-if director been selected, by an incorporator – if in the hands of a receiver, trustee, or rt appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	-
	Preside +	-