M99865

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Special Instructions to Fil	ing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

Better Families Throng DOCUMENT NUMBER: M99865 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: nail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 (Additional copy is Certified Copy enclosed) (Additional Copy 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

Articles of Amer	ndment ·	살 .
to	بير .	
Articles of Incorp	oration	
Better Families Through Tac	Kwan Do, Inc.	
(Name of Corporation as currently filed with the Flori	ida Dept. of State)	7.
U 99865		(a) (b)
(Document Number of Corporation (if kn	iown)	100 m
Pursuant to the provisions of section 607.1006, Florida Statutes, this con Incorporation:	rporation adopts the following amendment(s) to its Articles of
A. If amending name, enter the new name of the corporation:		
B.F.T.T.K.D. INC.		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.A.	"company," or "incorporated" or the ab ". A professional corporation name must c	breviation
B. Enter new principal office address, if applicable:	NA	
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the	
new regions and without the new regionered office address:	/^	
Name of New Registered Agent	0/A	
(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 and accept the obligations of the position.

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	<u>PT</u>	John Do	<u>•e</u>			
X Remove	<u>v</u>	Mike Jos	<u>nes</u>			
X Add	<u>sv</u>	Sally Sm	<u>nith</u>			/
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
1) Change		_				
Remove						
2)Change		_			/ 	
Add						
Remove				<u> </u>		
3) Change			1.			
Add			1/1/2			
Remove			\mathcal{V}			· · · · · · · · · · · · · · · · · · ·
4)Change		_				• • • • • • • • • • • • • • • • • • • •
Add			/		 .	
Remove						
5) Change		_				
Add						
Remove						
6)Change						
Xdd		-				
Remove						
			Ролг	. ?		

	If amending or adding additional Articles, enter change(s) here:
	(Attach additional sheets, if necessary). (Be specific)
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_	
,	If 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)
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	I $I\lambda$
•	

The date of each amendment(s) adoption:	Dec.	31-	2016	, if other than the
date this document was signed.		5 1	2	
Effective date if applicable:	Dec.	51-	9016	
	(no more than 9	0 days after a	mendment file date)	
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the shareholders was/were sufficient for the shareholders was sufficient for th		number of vo	otes cast for the amendment(s)	
☐ The amendment(s) was/were approved by must be separately provided for each volume.				
"The number of votes cast for the a	mendment(s) was/wei	re sufficient fo	or approval	
by N	(voting group)		"	
	(voting group)			
☐ The amendment(s) was/were adopted by t action was not required.	he board of directors	without share	holder action and shareholder	
☐ The amendment(s) was/were adopted by t action was not required.	he incorporators with	out sharehold	er action and shareholder	
Dated JAN	- 2- 20	17		
Signature //	· · · · · · · · · · · · · · · · · · ·	2/	<i>Y</i>	
selected, by an		e hands of a re	ors or officers have not been eceiver, trustee, or other court	
<u>M</u> p	Typed or printed	L LOC name of perso	K. Perez	
\sim	(1) pea or printed	mine or perso	n organigj	
ρ_{γ}	esident			
	(Title of person	i signing)		