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(Re	questor's Name)		
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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A 501(C)(3) Non-Profit Organization

August 12, 2010

Via US Mail
Florida Secretary of State
Amendment Section
Divisions of Corporations
PO Box 6327
Tallahassee, FL 32314

Re.: Amendment to American Debt Counseling, Inc.'s (ADC) Articles of Incorporation

To Whom It May Concern:

Please find attached to this letter an Articles of Amendment to Articles of Incorporation in addition to a check in the amount of \$35.00 for a filing fee. Should you need any further information or wish to discuss anything, please do not hesitate to contact me.

Yours truk

Christopher F. Meier General Counsel

COVER LETTER

Division of Corporations Debt Counseling Drc. 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: 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 Certified Copy Certificate of Status (Additional copy is Certified Copy

Mailing Address

TO: Amendment Section

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

Street Address

enclosed)

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

(Additional Copy is enclosed)

ALICALIAN AN O. 45 **Articles of Amendment Articles of Incorporation** (Name of Corporation as currently filed with the Florida Dept. of State)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

he new name must be distinguishable and c bbreviation "Corp." or "Inc." <u>"Company" (</u>		ncorporated" or the
. Enter new principal office address, if apprincipal office address MUST BE A STREE		
		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
		enter the name of the
new registered agent and/or the new regi		enter the name of the
		enter the name of the
new registered agent and/or the new regi		enter the name of the
<u>Name of New Registered Agent:</u>	istered office address: . (Florida street address)	, Florida
Name of New Registered Agent:	istered office address:	
new registered agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address: ew Registered Agent's Signature, if changing	(Florida street address) (City) ing Registered Agent:	, Florida (Zip Code)
<u>Name of New Registered Agent:</u>	(Florida street address) (City) ing Registered Agent:	, Florida (Zip Code)

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)

<u>Title</u>	Name	Address	Type of Action
<u>D</u>	LINDA Cain	12781 Spikerush Ci	<u>C</u> Add
	Downa Ruboustein	Boya Reton, to 23	☐ Remove
<u>D</u>	Downa Ruboustin	33928	Add
		21883 Reflection CN BOLA RATON, FUZZ	_
			_
			_
E. If amen	ding or adding additional Articles, enter	change(s) here:	
(anach u	authonal sheets, if necessary). (be speci	jic)	
			,
			· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) ad	loption: 8 11 2010			
Effective date <u>if applicable</u> :	(date of ddopilon is required)			
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)			
There are no members or memb	ers entitled to vote on the amendment(s). The amendment(s) was/were s.			
DatedSignature	8 2 2010			
(By the c have not	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)			
	MARIA C. BRAGA (Typed or printed name of person signing)			
_	President			
	(Title of person signing)			

Page 3 of 3