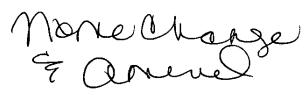
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(Re	equestor's Name)		
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COVER LETTER

TO: Amendment Section • 7 Division of Corporations
NAME OF CORPORATION: Orlando ART Collective Florida Quack
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing. FEI/EIN # 30/84/996
Please return all correspondence concerning this matter to the following:
JACK FOWLER (Name of Contact Person)
(Name of Contact Person)
Orlando ART Collective, INC (Firm/Company)
4504 SUMMERGROVE AVE
(Address)
CRLANDO FL 33813 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SACK FOW LER at (407) 383-9555 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

Articles of Amendment

to Articles of Incorporation of

FILED

FLORIDA	QUACK,	/NC	•	m out.El.
(Name of Corporation as currently	filed with the Flo	orida Dept. of State)	5015 NOA -	5 PH 4: 54
the second second	17.00	V 0 400000 ration (if known)	126 TIRETAL	MY OF STATE
(Document	Number of Corpor	ration (if known)	TALLAHAS	SEE, FLUKIUA
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporation		es, this <i>Florida Not Fo</i>	r Profit Corporation	n adopts the following
A. If amending name, enter the new name	ne of the corporat	ion:		
ORLANDO ART	COLLEG	CTIVE. IN	C	The new
ORLANDO ART name must be distinguishable and contain "Company" or "Co." may not be used in	the word "corpora the name.	tion" or "incorporated	l" or the abbreviation	on "Corp." or "Inc."
B. Enter new principal office address, if (Principal office address MUST BE A ST.		1800 E. (Or lando	Polonial I	Dr. 32803
 C. Enter new mailing address, if applic (Mailing address MAY BE A POST O) D. If amending the registered agent and 	FFICE BOX)	ce address in Florida	enter the name of	the
new registered agent and/or the new			carer the Rame of	1110
Name of New Registered Agent:	JACK 1	FOWLER		
		SUMMER6: (Florida street address)	ROVE AV	E
New Registered Office Address:	0 -			
	OR LAN (City)	DO	, Florida (Zip Code)	32812
New Registered Agent's Signature, if ch	anging Registered	Agent:		
I hereby accept the appointment as register	red agent. I am fa	miliar with and accept	the obligations of the	he position.
	Mill H	outer		
Sign	dulye of New Regis	stered Agent, if changir	1g	

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 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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>_P</u>	Jennifer Starr	<u>2218 Depaum A</u> ve Orlando FL 32804
2) X Change Add	<u>P</u>	Harold Powe//	101 S. BUMBY AVE, C13 Orlando FL 32804
Remove 3) Change Add Remove	_5_	Jarrod Pope	3850 Benson Park Blvg Orlando FL 32329
4) Change Add Remove	<u> </u>	Barbara Nowick	1642 Hillcress ST Orlando FL 32803
5) Change Add Remove	<u>S</u>	Lisa Sulliyan Duwlap	119 S. Deerwood Ave Orlando FL 32825
6) Change Add Remove			

The date of each amendment(s) adoption: OCT 35 20/2	
Effective date if applicable: Oct 35 3012	
(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 DCT 31 3013 Signature MWW MWILL	
(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)	
JACK FOWLER	
(Typed or printed name of person signing)	
Treasurer	
(Title of person signing)	