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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:COMMO	UNITY CON	CERN FOR CHILD	RENI	OND FAMILY
DOCUMENT NUMBER: <u>NO400</u>	000,2955			_
The enclosed Articles of Amendment and fee are sub	omitted for filing.		(C)	
Please return all correspondence concerning this mat	ter to the following:		H AON BEE	·.
GEORGE B	ELFOND			- , to - ! , to - ! , - , -
	(Name of Contact Perso	on)		3
COMMUNITY CONCE	(Firm/ Company)	HILDREN AND A	A MY	LIES
941 TAMIAMI TRAIL	- SUITE (Address)	<u>C</u>		
PORT CHARLOTTE, F.	23953 (City/ State and Zip Co	de)		_
CONTACT C CCFC E-mail address: (to be use	F. OR C	t notification)		_
For further information concerning this matter, pleas	e call:			
GEORGE RELFONI (Name of Contact Person	at (561) 305 - 228 Area Code) (Daytime Telephone N	2 umber)	_
Enclosed is a check for the following amount made	payable to the Florida De	partment of State:		
\$35 Filing Fee Status Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		
Mailing Address Amendment Section	Ame	et Address adment Section		
200	Dini	ion of Compensions		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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Artic	es of Amendment	-	•
	to s of Incorporation		
Article	of		3
DMMUNITY CONCERN FO	OR CHILDREN & FA MI ntly filed with the Florida Dept. of State)	ILIES IN	ك. أ
0//4(A//)0	ber of Corporation (if known)		
to the provisions of section 617.1006, Florida Statu int(s) to its Articles of Incorporation: ending name, enter the new name of the corpora		acopis ine tottowing	
A //O		The new	
N 17 st be distinguishable and contain the word "corpor	ation" or "incorporated" or the abbreviation	"Corp." or "Inc."	
r new principal office address, if applicable:			
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	ffice address in Florida, enter the name of the address: (Florida street address) (City) (Ziged Agent:	da Code)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1

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		Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change Add Remove	CFO	PARTH A PATEL	3486 EASY ST PORT CHARLOTTE FL 33952
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add			
6) Change Add Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)		
			
		.	
			<u> </u>
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The date of each amendment(s) adoption:	11/06/17	, if other than th
date this document was signed.	1/20/10	
Effective date if applicable: (no m		late)
Note: If the date inserted in this block does not document's effective date on the Department of	meet the applicable statutory filing requi State's records.	irements, this date will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the was/were sufficient for approval.	e members and the number of votes cast	for the amendment(s)
There are no members or members entitled adopted by the board of directors.	to vote on the amendment(s). The amen	ndment(s) was/were
Dated		0
Signature	chairman of the board, president or other	or officer if directors
have not been selected,	by an incorporator – if in the hands of a iduciary by that fiduciary)	receiver, trustee, or
Geo	TSE Delford (Typed or printed name of person sign	
	(Typed or printed name of person sig	gning)
	2 hairman	
	(Title of person signing)	