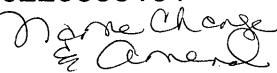
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4/20/12

COVER LETTER

TO: Amendment Section

Division of Corporations JOIN, N'S FORCES WITH VET, IJC. NAME OF CORPORATION: No 40000 11728 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) GINING FORCES WITH VETS,
(Firm/Company) Vin Marisia Baca (2750) [150, In 33498-6707 (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person) at (561) 391-1603

(Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: ☑\$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

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Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State)

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

(Document Number of Corporation (if known)

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. Il amending name, enter the new name of the c	corporation:
name must be distinguishable and contain the word	"corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	corporation of incorporated of the approximent Corp. of Inc.
B. Enter new principal office address, if applicable	le: 20510 Via Marisa
(Principal office address MUST BE A STREET AD	DRESS) Been Rarow, Florida
	·
~	<u> </u>
C. Enter new mailing address, if applicable:	OX) PO. Bux PROOYZ
(Mailing address <u>MAY BE A POST OFFICE B</u>	
	Boca Raton, Falor. In
	<u> </u>
	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent:	25x11 W. JaHasan
_ 205	(Florida street address)
New Registered Office Address:	(Florida street address)
	5-c2 707 - Florida 33492 - 6707 (City) (Zip Code)
	(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

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 <math>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	PT John Doe		
X Remove	<u>V</u> <u>Mike Jones</u>		
X Add	SV Sally Smith		
Type of Action (Check One)	<u>Title</u> <u>Name</u>		<u>Addres</u> s
1) Change Add Remove	Parsi, Sur Beck	Pred Johnson	Zo510 Sin Marisa Boen Ration, PL 33498-6707
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove		······································	
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
NINE			
			
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			T-7-111
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	** ** to		

The date of each amendment(s) adoption: _	4/12/12
Effective date <u>if applicable</u> :	4/12/12
	o more than 90 days after amendment file date)
Adoption of Amendment(s) (C	CHECK ONE)
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)
There are no members or members entitl adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were
Dated 4-//2	-//2
Signature	M do
have not been selecte	ice chairman of the board, president or other officer-if directors d, by an incorporator – if in the hands of a receiver, trustee, or ifiduciary by that fiduciary)
	sell Jonasia
1 1 1 1	or printed name of person signing)
- Pa.	esident
(Title o	f person signing)