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SECRETARY OF STATE
TALLAHASSEF FINESE

AUG 2 1 2018 T. LEMIEUX

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Retrouvaille of Orland  N:	lo, Inc.		
DOCUMENT NUMBER: .	N05000004118			
The enclosed Articles of Am	endment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Frank Milmore				
	(	Name of Contact Per	rson)	
Retrouvaille of Orlando, Inc	i.			
		(Firm/ Company)	)	
1099 Shaffer Trail				
		(Address)		
Oviedo, FL 32765				
	(	City/ State and Zip C	inde)	
frankandphyllis@earthlink.	net			
15	-mail address: (to be used)	for future annual repo	ort notification	n)
For further information conc	erning this matter, please c	all:		
Frank Milmore		at	407	366-8941
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida D	epartment of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is osed)
B.fili A		C4	nat Addunas	

#### 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

## to Articles of Incorporation

of

Retrouvaille of Orlando, Inc.	01	1	FILED
(Name of Corporation a	s currently filed with	the Florida	Dept. of State)
N05000004118			2815 AUG   LA PP   15.88
(Docume)	nt Number of Corpora	tion (if knowr	SECRETARY OF STATE
Pursuant to the provisions of section 617,1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this <i>Florid</i>	a Not For Pro	ALLAHASSEE FLORIDA of a Corporation adopted the following
A. If amending name, enter the new name of the c	orporation:		·
			The ne
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	corporation" or "inco	orporated" or	the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)		··	
	···		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>)X</u> )		
	<del></del>		
D. If amending the registered agent and/or registered new registered agent and/or the new registered		Florida, ente	r the name of the
·			
Name of New Registered Agent:			
_		ıFlorida	street address)
New Registered Office Address:		,	
_			, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Reginerely accept the appointment as registered agent.	ristered Agent: I am familiar with an	d accept the o	obligations of the position,
	Signature of Ne	w 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, at 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 Doe V Mike Jones SV Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change	D	Ronald L. Garey	3583 Holiday Road
Add			Palm Beach Gardens, FL 33410
X Remove			
2) Change	D	Frank Milmore	1099 Shaffer Trail
X Add			Oviedo, FL 32765
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
<del></del>			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)			
Not Applicable				
				<b></b> -
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lho	date of each amendment(s) adoption: if other the
late	this document was signed.
	08/05/2019
្ស	ctive date if applicable:
	(no more than 90 days after amendment file date)
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
Ado	ption 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
	08/05/2019 Dated
	Signature Qald Mul D
	(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)
	Donald Warner
	(Typed or printed name of person signing)
	President/Director
	(Title of person signing)