

(Re	equestor's Name)	<u></u>		
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NOV - 9 2017

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION	The International Cir	cle of Friends, Inc.		
DOCUMENT NUMBER:	N07000007258			
The enclosed Articles of An	nendment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
Hilda M. Porro				
		(Name of Contact Pers	on)	
Hilda M. Porro, P.A.				
	<u> </u>	(Firm/ Company)		-
12012 South Shore Blvd., S	uite 208			
		(Address)		
Wellington, Florida 33414				
	(City/ State and Zip Co	ode)	
hilda.porro@gmail.com				
Е	-mail address: (to be used	for future annual repor	t notification	<u> </u>
For further information conc	erning this matter, please of	all:		
Hilda M. Porro	561-798-3994 at			
	(Name of Contact Person)	(2	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida De	partment of S	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	ddress	Stree	t Address	

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

FILED

to
Articles of Incorporation NOV -7 PM 2: 52
of

The International Circle of Friends, Inc.			SECRETARY D	MESTATE FLORINA
(Name of Corporation	n as current	tly filed wi		
N07000007258				
(Document)	ment Numbe	er of Corpo	oration (if known)	-
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Flor</i>	ida Not For Profit Coi	rporation adopts the following
A. If amending name, enter the new name of th	e corporati	on:		
				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "in	worporated" or the ab	breviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		12012 South Shore Blvd., Suite 208		
		Wellington, Florida 33414		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		12012 Sou	uth Shore Blvd., Suite	208
		Wellington, Florida 33414		
D. If amending the registered agent and/or reginew registered agent and/or the new register			in Florida, enter the n	ame of the
Name of New Registered Agent:	Hilda M. E	Porro		
	12012 South Shore Blvd., Suite 208			
New Registered Office Address:		(Florida street address)		
new taganerea office than ess.	Wellington			, Florida
		(City)		(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			and accept the obligati	ons of the position.
			_0	
-	Sig	gnature of :	New 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, 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	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PD	Jean Dye	12012 South Shore Blvd., Suite 208
Add			Wellington, Florida 33414
Remove			
2) Change	VDT	Donald Binns	14524 Riverside Drive
Add			Fort Myers, Florida 33905
X Remove			
3) Change	VS	Hilda M. Porro	12012 South Shore Blvd., Suite 208
X Add			Wellington, Florida 33414
Remove			
4) Change	Т	John Harris	13410 Castlecombe Drive
X Add			Houston, Texas 77044
Remove			
5) Change			
Add			
Remove			·
6) Change			
Add			_
Remove			<u> </u>

f amending or addin attach additional shee	ts, if necessary).	(Be specific)				
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The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	al
Nate: If the date incerted in this bloc	k does not meet the applicable statutory filing require.	•
document's effective date on the Department		ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add was/were sufficient for approval.	pted by the members and the number of votes cast for	r the amendment(s)
There are no members or members adopted by the board of director	rs entitled to vote on the amendment(s). The amendns.	nent(s) was/were
Dated11 \ 3	117	
Signature		
have not been	an or vice chairman of the board, president or other of selected, by an incorporator – if in the hands of a recopointed fiduciary by that fiduciary)	
	Hilla M Porro	
	(Typed or printed name of person signing	ng)
	Vice President	
	(Title of person signing)	