## N10000001087

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## COVER LETTER ...

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: 44cKy Duck	Resole for Autism INC
DOCUMENT NUMBER: <u>N/1/00000/087</u>	
The enclosed Articles of Amendment and fee are submitted for filing	· ·
Please return all correspondence concerning this matter to the follow	ring:
Jegn Josey (Name of Con	tact Person)
(मामक ८०	
3412 Valley Cree,	K Drive
	2/2
E-mail address: (to be used for future ann	
For further information concerning this matter, please call:	
Jean Josef (Name of Contact Person)	at 850 - 933 - 2883 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Fl	
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & B43.75 Filing Certificate of Status Certified Co (Additional enclosed)	Opy Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida D	Dept. of State)
N 100000010	08 7
	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	S 202
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Maning maness <u>MAT BEAT CAT OFFICE BOA</u> )	
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office ag	ddress:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
and the same of th	
	, Florida
	,
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	
	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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add		Doe Jones Smith	remove
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	Tres.	William S. Morris	3292 Sugar Berry Way Tall, Fla. 32303
Remove			
2) Change Add			
Remove 3 )			2020   Stor
4) Change Add			FEB -
Remove			P 111
5) Change Add			
Remove			
6) Change Add			
Remove		Page 2 of 4	
E. <u>If amending or add</u> (attach additional sho		rticles, enter change(s) here:	

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	Page 3 of 4		
The date of each amendment(s) adopt	tion: 2-2-2020	, it oth	er than the
date this document was signed.			
Effective date <u>if applicable</u> :			
Encerve date <u>ir appreame</u> .	(no more than 90 days after amendment file date)		
Note: If the date inserted in this block document's effective date on the Depart	loes not meet the applicable statutory filing requirements, this date will ment of State's records.	not be listed	as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopt was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)		

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 2-2-2020
Signature Jean Joseph
(By the grairman 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)
Tean Josey (Typed or printed name of person signing)
President
(Title of person signing)

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