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| PICK-UP | ☐ WAIT | MAIL |
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| (Bu | siness Entity Na | me) |
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| . (Do | cument Number |) |
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| Certified Copies | Certificate | s of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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10 APR -2 MILLION SECRETARY OF STATE

C.COULLIETTE

APR 0 5 2310

EXAMINER

. COVER LETTER

TO: Amendment Section
Division of Corporations

į

| NAME OF CORPO | ORATION: Carlton's Fami | ly Outreach and Suppo | rt Center, Inc. |
|-----------------------|---|--|---|
| DOCUMENT NUM | ивек: N1000003003 | | |
| The enclosed Article | es of Amendment and fee are sub | mitted for filing. | |
| Please return all cor | respondence concerning this matte | er to the following: | |
| | | ndra Carlton | |
| | (Name of | Contact Person) | |
| | (Firm/ | (Company) | |
| | 811 South S | Seminole Avenue | |
| | (A | ddress) | |
| | | e, Florida 33841 | <u></u> |
| | (Chy/ State | e and Zip Code) | |
| | | 45@yahoo.com for future annual report notifica | ation) |
| For further informat | ion concerning this matter, please | call: | |
| Cassandra Carlt | | at (<u>863</u>) 448-122 | |
| (Nam | e of Contact Person) | (Area Code & Daytin | ne Telephone Number) |
| Enclosed is a check | for the following amount made pa | syable to the Florida Department | t of State: |
| □\$35 Filing Fee | ☐ \$43.75 Filing Fee & 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) |
| Amo Div P.O | ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314 | Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301 | - Circle |

Articles of Amendment, to **Articles of Incorporation**

| Carlton's Family Outreach and Support Center, Inc. | | | | | |
|--|------------|-----------|----------------|-------------------|---|
| (Name of Corporation | as current | y filed w | ith the Florid | a Dept. of State) | _ |
| | N1000 | 00030 | 03 | | |
| | | 2.0 | 1 (101 | | |

| (Maine of Corporation as current) | y med with the riotida peption | <u>State</u>) |
|--|---------------------------------------|-----------------------------|
| N10000 | 0003003 | |
| (Document Number | of Corporation (if known) | |
| Pursuant to the provisions of section 617.1006, Flor the following amendment(s) to its Articles of Incorp | | · Profit Corporation adopts |
| A. If amending name, enter the new name of the | e corporation: | |
| The new name must be distinguishable and conta abbreviation "Corp." or "Inc." "Company" or "Comp | | |
| B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A. | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or regis | BOX) | 10 APR -2 MIIIII |
| new registered agent and/or the new registered | | enter the name of the |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (Florida street address) | |
| | (City) | , Florida (Zip Code) |
| | (Cily) | (Zip Code) |
| New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agreement position. | | cept the obligations of the |
| | -tune of New Designation of Assert if | |

Signature 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)

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|---------------|--|---------|-------------------|
| <u></u> | | | ☐ Add ☐ Remove |
| | | | Add Remove |
| | | | ☐ Add ☐ Remove |
| (attach addi | g or adding additional Articles, enter itional sheets, if necessary). (Be specif Incorporator - Name and Address | ic) | eads |
| Cassandra | Carlton | | |
| 811 South S | Seminole Avenue | | |
| Fort Meade, | , Florida 33841 | | |
| 510 South E | ast Lake Street, Stuart, Florida 34 | | |
| Article VII - | incorporator- Should Read | | |
| Name and A | Address of Incorporator | | |
| Cassandra (| Carlton | | |
| 811 South S | Seminole Avenue | | |
| Fort Meade, | , Florida 33841 | | |
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| e e e | • |
|---|--|
| The date of each amendment(s) add | option: 03/29/2010 (dute of adoption is required) |
| | (no more than 90 days after amendment file date) |
| Adaption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were adoptions was/were sufficient for approval. | pted by the members and the number of votes east for the amendment(s) |
| There are no members or member adopted by the board of directors | ers entitled to vote on the amendment(s). The amendment(s) was/were |
| Dated_03/30/201 | <u>o</u> |
| Signature | (14 |
| have not t | nairman of vide chairman of the board, president or other officer-if directors been selected, by an incorporator — if in the hunds of a receiver, trustee, or appointed fiduciary by that fiduciary) |
| J. | Annette B Jones |
| | (Typed or printed name of person signing) |
| | Vice-President |
| | (Title of person signing) |

Page 3 of 3