N11000003515

(Re	equestor's Name)			
(Ac	ldress)			
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(Ci	ty/State/Zip/Phone	= #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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Amend CC 104,4,14

COVER LETTER

TO: Amendment Section Division of Corporations

COMMUNITY REHABILITATION AND RESOURCES CENTER, INC. NAME OF CORPORATION: N11000003515 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ERMILUS PHILIUS (Name of Contact Person) GROUP INVESTMENT AND MANAGEMENT, LLC (Firm/ Company) 100 E LINTON BLVD SUITE 133A (Address) DELRAY BEACH, FL 33483 (City/ State and Zip Code) CRRC97@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ERMILUS PHILIUS (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □ \$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

Amendment Section **Division of Corporations** P.O. Box 6327 Taliahassee, 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

COMMUNITY REHABILITATION AND RESOURCES CENTER, INC

(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
N11000003515		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut 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 corporat	tion;	
name must be distinguishable and contain the word "corpora	ntion" or "incomposated" or the abbreviation	The new
"Company" or "Co," may not be used in the name.	mon or incorporated or the dooreviation	Corp. or Inc.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	125 SW 10TH ST	
	DELRAY BEACH, FL 3344	4
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	125 SW 10TH ST	
·	DELRAY BEACH, FL 3344	4 14 15 31
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		
Name of New Registered Agent:		•
New Registered Office Address:	(Florida street address)	
	, Florida	
(City,)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		e position.
Signature of New	v Registered Agent, if changing	

Page 1 of 4

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

ARTICH	F 111	CHALL	RE AN	MENDED	AQ	FOLL	OW.
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UPON THE DISSOLUTION OF THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE EXEMPT PURPOSES WITHIN THE MEANING OF
SECTION 501(c)(3) OF INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY
FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO THE FEDERAL GOVERNMENT
OR TO A STATE OR LOCAL GOVERNMENT, FOR A PUBLIC PURPOSE.
ANY SUCH ASSETS NOT DISPOSED OR SHALL BE DISPOSED OF BY A COURT OF COMPETENT
JURIDICTION IN THE COUNTY IN WHICH THE PRINCIPAL OFFICE OF THE ORGANIZATION IS THEN LOCATED,
EXCLUSIVELY FOR SUCH PURPOSES OR TO SUCH ORGANIZATION OR ORGANIZATIONS,
AS SAID COURT SHALL DETERMINE, WHICH ARE ORGANIZED AND OPERATED EXLUSIVELY FOR SUCH PURPOSES.

The late	, if other than the	
	ective date if applicable:	<u> </u>
	(no more than 90 days after amendment file date)	
\de	option 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.	
	Dated March 23, 2014 Signature	
	(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)	
	ER ruj Ly S Phi Liu S (Typed or printed name of person signing)	
	President	
	(Title of person gigning)	

Jamania Jean - Marie

Secretary.