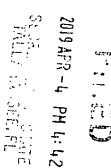
## N1200000 3334

| (Re                     | questor's Name)        |
|-------------------------|------------------------|
| (Ad                     | dress)                 |
| (Ad                     | dress)                 |
| (Cit                    | ty/State/Zip/Phone #)  |
| PICK-UP                 | ☐ WAIT ☐ MAIL          |
| (Bu                     | rsiness Entity Name)   |
| (Do                     | ocument Number)        |
| Certified Copies        | Certificates of Status |
| Special Instructions to | Filing Officer:        |
|                         |                        |
|                         |                        |
| <u> </u>                |                        |
|                         | Office Use Only        |



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R. WHITE APR 12 2013

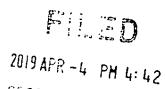
## COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION:              | Dove Sense, Inc                                 |   |                           |  | _ |
|-----------------------------------|---|---|---------------------------|--|---|
| , N12                             | .000003334                                      |   |                           |  |   |
| DOCUMENT NUMBÉR:                  |   |   |                           |  | — |
| The enclosed Articles of Amend    | ment and fee are submi                          | tted for filing.  |                           |  |   |
| Please return all correspondence  | concerning this matter                          | to the following:   |                           |  |   |
| Katrina Manley                    |   |   |                           |  |   |
|                                   | ()  | Name of Contact Pers  | son)                      |  |   |
|                                   |   |   | · <del>-</del>            |  |   |
|                                   |   | (Firm/ Company)   |                           |  |   |
| 614 East Hwy 50, Suite 266        |   |   |                           |  |   |
| <del>_</del>                      |   | (Address)   |                           |  |   |
| Clermont, FL 34711                |   |   |                           |  |   |
|                                   | (0  | City/ State and Zip Co  | ode)                      | 1 1181   |   |
| admin@klmanley.com                |   |   |                           |  |   |
| E-ma                              | il address: (to be used f                       | or future annual repo   | rt notification           | n)   |   |
| For further information concern   | ng this matter, please co                       | all:  |                           |  |   |
| Katrina Manley                    |   |   | 407<br>                   |  |   |
| (Na                               | me of Contact Person)                           | (   | Area Code)                | (Daytime Telephone Number)                                 |   |
| Enclosed is a check for the follo | wing amount made pays                           | able to the Florida Do  | partment of               | State:   |   |
| ■ \$35 Filing Fee                 | IS43.75 Filing Fee & E<br>Certificate of Status | 343.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | Certif<br>Certif          | 0 Filing Fee icate of Status ied Copy tional Copy is osed) |   |
| Mailing Add<br>Amendment S        |   |   | et Address<br>ndment Sect | ion  |   |

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 to Articles of Incorporation of



| Dove Sense, Inc.   |                     |                     |                     |                       | ار <del>د</del> ۱۰۰ |
|--|---------------------|---------------------|---------------------|-----------------------|---------------------|
| (Name of Corporation   | n as currently      | y filed with t      | he Florida Dept.    | of State)             | LE, FL              |
| N12000003334   |                     |                     |                     |                       |                     |
| (Docu  | ment Number         | of Corporati        | ion (if known)      | _                     | <del></del>         |
| Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:  | orida Statutes,     | this <i>Florida</i> | Not For Profit C    | orporation adopts     | the following       |
| A. If amending name, enter the new name of th  | e corporatio        | <u>n:</u>           |                     |                       |                     |
| N/A  |                     |                     |                     |                       | The new             |
| name must be distinguishable and contain the work "Company" or "Co." may not be used in the nam  B. Enter new principal office address, if application of the distribution of the distribu | <u>ie.</u><br>able: | on" or "incoi       | rporated" or the a  | ubbreviation "Corp    | ." or "Inc."        |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>  | - ( <u>BOX</u> )    | N/A                 |                     |                       |                     |
| D. If amending the registered agent and/or reginew registered agent and/or the new register  |                     |                     | Florida, enter the  | name of the           |                     |
| Name of New Registered Agent:  | N/A<br>—————        |                     |                     |                       |                     |
|  |                     |                     | (Florida street     | addrass!              | -                   |
| New Registered Office Address  | ;                   |                     | (Finital Siree)     | mares y               |                     |
|  | N/A                 |                     | <u> </u>            | , Florida             |                     |
|  |                     | (City)              |                     | (Zip Code)            |                     |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered age  |                     |                     | l accept the oblige | ations of the positio | on.                 |
|  | Sig                 | nature of Ne        | w Registered Agei   | nt 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>M</u> | hn <u>Doc</u><br>ike Jones<br>Ily Smith |         |
|-----------------------------------|-------------------|---|---------|
| Type of Action<br>(Check One)     | <u>Title</u>      | <u>Name</u>                             | Address |
| 1) Change                         | N/A               | N/A                                     | N/A     |
| Add                               |                   |   |         |
| Remove                            |                   |   |         |
| 2) Change                         | N/A               | N/A                                     | N/A     |
| Add                               |                   |   |         |
| Remove                            |                   |   |         |
| 3) Change                         | N/A               | N/A                                     | N/A     |
| Add                               |                   |   |         |
| Remove                            |                   |   |         |
| 4) Change                         | N/A               | N/A                                     | N/A     |
| Add                               | 1                 |   |         |
| Remove                            | 1                 |   |         |
| 5) Change                         | N/A               | N/A                                     | N/A     |
| Add                               |                   |   |         |
| Remove                            |                   |   |         |
| 6) Change                         | N/A               | N/A                                     | N/A     |
| Add                               |                   |   |         |
| Remove                            |                   |   |         |

| E. | If amending o | r adding | additional | Articles, | enter | change(s) | <u>here</u> : |
|----|---------------|----------|------------|-----------|-------|-----------|---------------|
|    |               |          |            |           |       |           |               |

(attach additional sheets, if necessary). (Be specific)

| Article III - Purpose:  |
|---|
| The corporation shall operate exclusively for charitable, educational and other purposes within the meaning of section        |
| 501(c)(3) of the United States Internal Revenue Code of 1986 (hereinafter "Code"). As a means of accomplishing the            |
| foregoing purposes, the corporation shall have the power to engage in any lawful act or activity necessary or appropriate     |
| to the attainment of those purposes; provided, however, that notwithstanding any other provision of these Articles of         |
| Incorporation, the Bylaws, or any other provision of law, the corporation shall not have the power to carry on any activities |
| which would cause it to fail to qualify, or to fail to continue to qualify, as (i) an organization exempt from federal income |
| tax under section 51(c)(3) of the Code, or (ii) an organization to which contributions are deductible under section 170(c)2   |
| of the Code.  |
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|   |

| r k.  | date of each amendmen                           | April 1, 2012   | , if other than the |
|-------|---|---|---------------------|
|       | this document was signed                        | -   | , in other than the |
| : ee, | ective date <u>if applicable</u> :              | immediately   |                     |
| LIR   | ective date in applicable.                      | (no more than 90 days after amendment file date)  |                     |
|       |   | his block does not meet the applicable statutory filing requirements, this date will not be<br>he Department of State's records.  | e listed as the     |
| ٩de   | option of Amendment(s)                          | ( <u>CHECK ONE</u> )  |                     |
|       | The amendment(s) was/was/were sufficient for a  | vere adopted by the members and the number of votes cast for the amendment(s) pproval.  |                     |
|       | There are no members or adopted by the board of | members entitled to vote on the amendment(s). The amendment(s) was/were directors.  |                     |
|       | Dated 4   | 1 19  |                     |
|       | Signature                                       | atting  | -                   |
|       | have  | e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary) |                     |
|       | Ka  | strīna Manley   |                     |
|       |   | (Typed or printed name of person signing)   |                     |
|       | Pre   | esident   |                     |
|       | <del></del>                                     | (Title of person signing)   |                     |