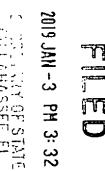
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:EXF	<u>elon Associat</u>	ion, Inc.	
DOCUMENT NUMBER: N120	00004882		
The enclosed Articles of Amendment and fee a	re submitted for filing.		
Please return all correspondence concerning thi Carl Bryant, Inc.	_		
	(Name of Contact Persor	1)	
ExFelon Associ	ation, Inc.		
	(Firm/ Company)		
711 West 36	th Street		
	(Address)	*	
Riviera Beac	ch. Florida	a 33404	
	(City/ State and Zip Code	e)	
exfelonassocia E-mail address: (to t	ation@gmai	I.com	
For further information concerning this matter,	please call;		
Carl Bryant, Sr	• at	561-502-317	73
(Name of Contact		rea Code) (Daytime Telephone Number)	1
Enclosed is a check for the following amount n	nade payable to the Florida Depa	artment of State:	
☎ \$ 35 Filing Fee		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio	Address Iment Section on of Corporations Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

EX FELON ASSOCIATION, INC.

2019 JAN - 3 PM 3: 32

(Name of Corporation as	currently filed with the Flo	rida Dept. of State)
	N12000004882	IALLAHASSEE, FL
(Document	Number of Corporation (if k	
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)	
	- · · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	<u>Y</u>)	·
B. M		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent:		
Name of New Registered Agent.	· · · · · · · · · · · · · · · · · · ·	
_		londa street address)
New Registered Office Address:	·	
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi		t the obligations of the position.
	Signature of New Revis	tered 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	\underline{V} Mik	n Doc se Jones sy Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	_VP	Julia Elva	2312 Redwood Road
Add			West Palm Beach, Fl
X Remove			33409
2) Change X Add	_VP	Sandra Davis	14759 SW Dr Martin I King Jr. Dr.
Remove			Indiantown, FI 34956
3)Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			.
Remove			
5) Change			
Add			
Remove			

(attach additional sheets, if necessar	y). (Be specific))			
N/A			. <u>.</u>		
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The date of each amendment(s) ad late this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adwas/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) i.	
There are no members or members adopted by the board of directors	pers entitled to vote on the amendment(s). The amendment(s) was/were ers.	
Dated 12	31/2018	
Signature (Buthe chair	man or vice chairman of the board, president or other officer-if directors	
have not bee	en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Carl Bryant, Sr.	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	