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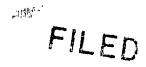
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Rockers	s In Recovery	, Inc.
DOCUMENT NUMBER: N120000	06769	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Lori Sullivan		
	(Name of Contact Person	3)
	(Firm/ Company)	
825 NE 12th Ave		
	(Address)	44,000
Pompano Beach, FL 3	3060	
	(City/ State and Zip Cod	e)
lmsullivan16@b		
`	used for future annual report	notification)
For further information concerning this matter, ple	ease call:	
Steven E Musgrove	561	ຸ308-1582
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florida Depa	artment of State:
\$35 Filing Fee	& □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section		Address Iment Section

Amendment Section 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



Rockers In Recovery, Inc.		#17 OCT -8 PM 12: 11
(Name of Corporation as currently file	ed with the Florida Dept. of S	tate) PA 12: 11
N12000006769		TALLAHASSE UF STATE
(Document Nur	mber of Corporation (if known)	SECRETARY OF STATE TALLAHASSEE. FLORUZA
Pursuant to the provisions of section 617.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this Florida /	Not For Profit Corporation adopts the following
A. If amending name, enter the new name o	f the corporation:	
		The new
name must be distinguishable and contain the v "Company" or "Co." may not be used in the r		porated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable (Malling address MAY BE A POST OFFI	<u>::</u> CE BOX)	
D. If amending the registered agent and/or new registered agent and/or the new regi		lorida, enter the name of the
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	(Florida street add	ress)
		, Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of		accept the obligations of the position.
Signatur	e of New Registered Agent, if c	hanging

Page 1 of 4

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		Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	RICHARD GOODMAN	6060 SW 15th Street
X Add			Plantation, FL 33317
Remove			
2) Change	D	RICKY BYRD	87-06 159th Avenue
X Add			Howard Beach, NY 11414
Remove			
3) Change			
Add			
Remove			
4) Change		***************************************	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		•	

(attach additional sheets, if necessary). (Be specific)
Add the following article:
Article IX: Upon the dissolution of this organization, assets shall be
distributed for one or more exempt purposes within the meaning of
section 501(c)(3) of the 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.

The date of each amendment(s) adoption: U9/24/2012			
Effective date if applicable: 09/24/2012			
Effective date <u>in applicative</u> .	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were as was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.		
☐ There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.		
Dated 10	5/2012		
(By the chair have not be	rman or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)		
Lori Sulliva	an		
	(Typed or printed name of person signing)		
President			
	(Title of person signing)		