N/200000 9976

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
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R. WHITE 'JUL 03 2019



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	RECESS FOR CH				
	N12000009976				
DOCUMENT NUMBER:					_
The enclosed Articles of Am	nendment and fee are sub	mitted for filing.			
Please return all corresponde	ence concerning this matte	er to the following:			
RUFUS FILMORE SR.					
		(Name of Contact P	erson)		-
RECESS FOR CHILDRE	N INC.				
		(Firm/ Compan	у)		_
2302 AVENUE C					
		(Address)			
FORT PIERCE, FLORIA	34950				
		(City/ State and Zip	Code)		_
ATLANTICISLAND@COM	MCAST.NET				
E	-mail address: (to be used	for future annual re	port notification	n)	_
For further information conc	erning this matter, please	call:			
RUFUS FILMORE SR.		at	772	882 9021	
	(Name of Contact Person			(Daytime Telephone Number)	_
Enclosed is a check for the fo	ollowing amount made pa	yable to the Florida	Department of	State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif is Certif	icate of Status ied Copy tional Copy is	
Mailing A	ddress	St	reet Address		

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

RECESS FOR CHILDREN INC.			2010 1011.0)). PH 3:51.
(Name of Corporation as	s currently	y filed with the Florid	ia Dept. of State)	, 14 - - - - - - - - - -
N12000009976				. Jane
(Docume)	nt Number	of Corporation (if kno	own)	
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes,	this Florida Not For	Profit Corporation	adopts the following
A. If amending name, enter the new name of the co	orporation	n:		
RECESS FOR AGED ADULTS INC.				Ti
name must be distinguishable and contain the word " "Company" or "Co," may not be used in the name.	'corporatio	on" or "incorporated"	or the abbreviation	The new on "Corp." or "Inc."
B. Enter new principal office address, if applicable	e· 2	2302 AVENUE C		
(Principal office address MUST BE A STREET ADDRESS)		FORT PIERCE, FLO	RIDA 34950	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		2302 AVENUE C	RIDA 34950	
 If amending the registered agent and/or registe new registered agent and/or the new registered 	red office I office add	address in Florida, e Iress:	nter the name of t	<u>he</u>
Name of New Registered Agent:	I/A			
N	I/A			
		(Flor	ida street address)	
<u>New Registered Office Address</u> : N/A			, Flori	N/A da
_		(City)		p Code)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent.	I am fami	liar with and accept th		
	/A	nature of New Register		
	Sign	nature of New Register	red Agent, if chang	ing

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			45344
Remove			

E. If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)				
"N/A"					
		-			
			.		<u></u>
				·····	
-					
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			, , , , , , , , , , , , , , , , , , ,		
	-				
			-		
-					
"N/A"					

	JUNE 21, 2019	
The date of each amendate this document was:	dment(s) adoption:	, if other than the
Effective date if applic	JUNE 21, 2019	
	(no more than 90 days after amendment file date)	
	ed in this block does not meet the applicable statutory filing requirements, this d te on the Department of State's records.	ate will not be listed as the
Adoption of Amendme	ent(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendat for approval.	nent(s)
There are no membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment(s) was/vard of directors.	were
Dated	JUNE 21, 2019	
Signature	Rufor Filmore Sr.	
	By the chairman or vice chairman of the board, president or other officer-if dire have not been selected, by an incorporator – if in the hands of a receiver, truste other court appointed fiduciary by that fiduciary)	
	RUFUS FILMORE SR.	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	