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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	RS FOR THE SOUL I	FOUNDATION, INCORPORATION		
DOCUMENT NUMBER: N12000010556				
The enclosed Articles of Amendment and fee are sub	mitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
	g.			
LETA PITTMAN				
	(Name of Contact Perso	on)		
	(Firm/ Company)			
4504 NAV SETU OTOSS	• •			
1521 NW 55TH STREE				
	(Address)			
MIAMI, FL 33142				
	(City/ State and Zip Coo	le)		
E-mail address: (to be used	for future annual report	notification)		
For further information concerning this matter, please	call:			
LETA PITTMAN	at (305	333-8154		
(Name of Contact Person)		ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made pa	yable to the Florida Dep	artment of State:		
□ \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□\$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		Address		
Amendment Section		Iment Section		
P.O. Box 6327	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			
Tallahassee, FL 32314		Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



DREAMCATCHERS FOR THE SOUL FOUNDATION, INCORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State) N12000010556 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

Signature of New Registered 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	V Mik	n <u>Doe</u> se <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	T	PITTMAN, LETA	1521 NW 55TH STREET
Add			MIAMI, FL 33142
X Remove			
2) Change			·
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
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The date of each amendmen	nt(s) adoption: 12/1/2012
Effective date <u>if applicable</u> :	2/4/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/was/were sufficient for a	were 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	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.
Dated 2/4 Signature	gnella Reid
(By h	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)
PAME	LLA REID
	(Typed or printed name of person signing)
DIREC	TOR
	(Title of person signing)