N/4000001236

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· Comment from a state

NOV 21 2013

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Compour	nd Cares, In	c.			
DOCUMENT NUMBER: N1400001236					
The enclosed Articles of Amendment and fee are subs	mitted for filing.				
Please return all correspondence concerning this matte	er to the following:				
Rachel Shields					
	(Name of Contact Person	(1)			
	(Firm/ Company)				
3760 Helene St					
	(Address)				
Sarasota, FL 34233					
	(City/ State and Zip Code	2)			
rachel.shields@h	otmail.com				
E-mail address: (to be used		notification)			
For further information concerning this matter, please	call:				
Rachel Shields	941	302-1668			
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)			
Enclosed is a check for the following amount made pa	yable to the Florida Depa	riment 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle essee, FL 32301			

Articles of Amendment to Articles of Incorporation of

Compound Cares, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N14000001236 (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: 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. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: Name of New Registered Agent: (Florida street address) New Registered Office Address: (Zin 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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	S	Cristina Tomas	430 S Lime Ave
Add			Sarasota, FL 34237
Remove			
2) X Change	<u>T</u>	Benito Gonzales	430 S Lime Ave
Add			Sarasota, FL 34237
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
Amend Article III: Add "The organization is organized exclusively				
for charitable, religious, educational, and scientific purposes under				
Section 501(c)(3) of the Internal Revenue Code, or corresponding				
section of any future federal tax code."				
Add 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.				

date this document was signed.	ioption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac was/were sufficient for approve	dopted by the members and the number of votes east for the amendment(s) al.	
There are no members or members adopted by the board of directors	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Dated $\frac{10}{6}$	20/14	
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)	_
Jacob Shi	elds	
	(Typed or printed name of person signing)	
President		
	(Title of person signing)	