## N/4000003542

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:				
N14000003542				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub	mitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
Royce Hood				
	(Name of Contact Per	rson)		
Law Office of Royce Hood				
	(Firm/ Company)	)		
1311 E Seiberling Ave, Ste A				
	(Address)			
Peoria Fleights, IL 61616				
	(City/ State and Zip C	Code)		
royce@rhoodlaw.com				
E-mail address: (to be used	d for future annual rep	ort notification	)	
For further information concerning this matter, please	e call:			
Royce Hood	at		323-0901 ext 700	
(Name of Contact Person	n)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made p	ayable to the Florida D	epartment of S	State:	
□ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Section		eet Address	on.	
Division of Corporations				

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Law of Life Summit, Inc.				
( <u>Name of Corporation as curren</u> N14000003542	tly filed with the Florida Dept. o	of State)		
(Document Numb	er of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida Statute imendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Co</i>	rporation adopts the following		
. If amending name, enter the new name of the corporat	ion:			
	. 9 M	The new		
ame must be distinguishable and contain the word "corporal Company" or "Co." may not be used in the name.	tion or incorporated or the ab	previation Corp. or Inc.		
Enter new principal office address, if applicable:	1311 E Seiberling Ave, Ste A			
Principal office address MUST BE A STREET ADDRESS	Peoria Heights, IL 61616			
		216		
	<u> </u>	3		
Enter new mailing address, if applicable:	1311 E Seiberling Ave, Ste A	*55 <b>5</b>		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	Peoria Heights, IL 61616			
		OF STA		
		हुँ ज		
. If amending the registered agent and/or registered office	ce address in Florida, enter the 1	name of the		
new registered agent and/or the new registered office a	ddress:			
Name of New Registered Agent:				
<u></u>	(Florida street address)			
New Registered Office Address:				
		, Florida		
	(City)	(Zip Code)		
ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fair		ions of the position		
истеоў аксері іне арронитені as registerea agent. Тат Ja	тист wun ана ассері іне обидав	ions of the position.		
So	ignature 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 <math>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>V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Dana Cody	P.O. Box 2015
Add X Remove			Napa, CA 94558
X 2) Change	D	Royce Hood	1311 E Seiberling Ave, Ste A
Add			Peoria Heights, IL 61616
Remove X 3) Change	D	Patrick Castle	633 S. Berry Pine Rd
Add			Rapid City, SD 57702
4) Change	D	William Sullivan	4170 Crayton Road, #C7
X Add Remove			Naples, FL 34103
5) X Change	D	Michael Acquilano	901 Orange Grove Road
Add			Charleston, SC 29407
Remove			
6) Change			
Add			
Remove			

attach additional sheets	, if necessary).	(Be specifi	c)					
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<b></b>								
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	716 •	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	·
Note: If the date inserted in this bl	ock does not meet the applicable statutory filing requirements, this date w	ill not be listed as the
document's effective date on the D		
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(sal.	s)
There are no members or men adopted by the board of direct	abers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Dated	3/4/16	
Signature		
have not be	rman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Royce Hood	
	(Typed or printed name of person signing)	
	Preiden+	
	(Title of person signing)	