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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Dolley Doing Right, Inc.
DOCUMENT NUMBER: 14000011407
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lari Willick
(Name of Contact Person)
Dudley Doing Right Inc.
Dudley Doing Right, Inc. (Firm/Company)
650 Marisal Orive
(Address)
Wew Snyros Beach, FL 32168 (City/ State and Zip Code)
(City/ State and Zip Code)
Oudle Doing Right @ gmail. com E-mail address! (to be used for future annual report notification)
→E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
205, Willick at 386 - 424-9885
207: Willick at 386 - 424-9855 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\overline{\subset} \subseteq
No. 11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1

Mailing Address

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

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Dudley Doing Rigi	1. #	NC.		
(Name of Corporation as	current	y filed with the Florida Dept. of State)		
V14000011407				
(Document	Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes	, this Florida Not For Profit Corporation a	dopts the	for owing
A. If amending name, enter the new name of the con	rporatio	on:		프 55 [
NIA				The new
name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name. B. Enter new principal office address, if applicable:				or Inc.
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)	650 Harisal Orive New Singras Beach, FL 7	53118	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>(</u>)	650 Harisd Drive New Smyrna Beach. FL	32/6	,8
D. If amending the registered agent and/or registered new registered agent and/or the new registered of			<u>:</u>	
Name of New Registered Agent:	704	Willick	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	650	Harisal Drive (Florida street address)		
· 	Wew	Smyrs Beach, Florida (City) (Zip (.168
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I			osition.	
	Sig	nature 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> ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Change Add Remove	_\$	Denise Dudek	237 Crown Odes Way Longwood, FL 32779
2) Change Add Remove	<u>T</u>	Sizzme M. Pagars	227 Croin Oslos Way Languad, FL 32779
3) Change Add Remove	S	Linda Z. Fishkind	Low Smyrns Beach, FL 32K8
Change Add Remove		Dagles R. Willick	150 Marisal Drive New Snyms Beach FL 32168
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)				
Additional Article-				
The President, Lori Willick is the only one that can make am	trochs			
The President, Lori Willick is the only one that can make and to the articles of incorporation until bylans are put in place	by.			
the new board.				
 				
				
	· 			

CHECK ONE		date of each amendment(s) adopte this document was signed.	ion:	, if other than the
(no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. Dated Ohights Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing)		•		
Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. Dated OIDIS Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) OTHER AMENDMENT OF THE AME	Effe	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. Dated Olidio Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Lori, Willick (Typed or printed name of person signing)				l not be listed as the
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. Dated Olight Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Lor. Willick (Typed or printed name of person signing)	Ada	ption of Amendment(s)	(CHECK ONE)	
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing)			ed by the members and the number of votes cast for the amendment(s)	
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing)	Ø	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Lov. Willick (Typed or printed name of person signing)		Dated	1/15	
other court appointed fiduciary by that fiduciary) Lor, Willick (Typed or printed name of person signing)		(By the chairman		
(Typed or printed name of person signing)				
		201.		
(Title of person signing)		Pres		