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SI CHETARY OF STATE

JUN 2 0 2016

C LEWIS

TO: Amendment Section Division of Corporations Thank Your First Responder, Inc NAME OF CORPORATION: _ DOCUMENT NUMBER: N 1500000 600 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) For further information concerning this matter, please call:

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee \$\Bigsup \$43.75 Filing Fee & B\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

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 Articles of Incorporation 0000060 (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" "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: Florida (City) (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.

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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	ones	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change	<u></u> _	_		
Add				
Remove				
3) Change		_		
Add				
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,				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				<u> </u>
Remove				

ttach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
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	date of each amendment(s) a	doption: 6-7-16	, if other than the			
date	this document was signed.	1				
Effe	ective date <u>if applicable</u> :		SECRETARY OF STATE SECRETARY OF STATE OLVISION OF CORPORATION			
	•	(no more than 90 days after amendment file dat	te) DIVISION OF CORPORATION			
<u>Not</u> docu	e: If the date inserted in this blument's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	ements, this date 2010 nd the listed PM 12: 31			
Ada	option of Amendment(s)	(<u>CHECK ONE</u>)	•			
X	The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast fo	or the amendment(s)			
	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	-7-16				
	Signature	Stanton B. Smith				
		man or vice chairman of the board, president or other or en selected, by an incorporator – if in the hands of a re-				
		appointed fiduciary by that fiduciary)	ceiver, musice, or			
	<u>5</u>	Hanton B. Smith (Typed or printed name of person signing)	ng)			
	Ť	Managing Director (Title of person signing)	& Bd Member			