## N15000006152

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PICK-UP WAIT N	<b>/</b> AIL
(Business Entity Name)	
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ecovery, Inc.
N15000006152	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	etter to the following:
Lisa Haskins	
	(Name of Contact Person)
Came to Believe Recovery	
	(Firm/ Company)
1 Hampton Spring Rd	
	(Address)
Newton, NJ 07860	
	(City/ State and Zip Code)
LMH682@gmail.com	•
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
Lisa Haskins	862 266-7971
(Name of Contact Perso	
Enclosed is a check for the following amount made	payable to the Florida Department of State:
☐ \$35 Filing Fee ☐\$43,75 Filing Fee & Certificate of Status	

Mailing Address

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

Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Came to Believe Recovery, Inc.				
Name of Corporation as currently filed with the	Florida D	Dept. of State)		
N15000006152				
(Docum	ent Numb	er of Corporation (if k	(nown)	
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida Not F</i>	or Profit Corporation 2	idopts the following
A. If amending name, enter the new name of the	corporati	ion:		
N/A .				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		tion" or "incorporate	d" or the abbreviation	
B. Enter new principal office address, if applica	ble:	Came to Believe Re	covery, Inc.	
(Principal office address MUST BE A STREET A	DDRESS	2211 Lee Road, Sui	tc 100	
		Winter Park, FL 327	89	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i> )	Came to Believe Re	covery, Inc.	
		PO Box 303		
		Pluckemin, NJ 079	78-0303	
D. If amending the registered agent and/or registerew registered agent and/or the new registered agent:  Name of New Registered Agent:	Ed office a Karolyn	ddress: Suc Foreman		<del>-</del>
	——————————————————————————————————————		lorida street address)	<del> </del>
New Registered Office Address:		17	, , , , , , , , , , , , , , , , , , ,	
	Winter Pa	ırk	, Florida	32789
		(Ciry)	(Zip	Code)
New Registered Agent's Signature, if changing Foundation of the Agent's Properties of the Agent's Signature, if changing Foundation of the Agent's Signature, if the Agent's	L I am far Kar Sig	oly Suca gnature of New Regis	Forenon	202

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	PT         John Do           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	<u>Fitle</u>	Name	Address
1) Change Add	D	James Tellman	339 Pleasant Drive Warren, PA 16365
Remove 2) Change Add	D	Manuel J. Rapp	7451 SADLER ROAD MT. DORA, FL 32757
X   Remove	<u>D</u>	James Page	7451 SADLER RD MT. DORA, FL 32757
4) Change Add			
Remove  5) Change     Add     Remove			
6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

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		-
The date of each amendment(s) adoption: date this document was signed.	·	if other than the
Effective date if applicable:		
(7	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not be it of State's records.	listed as the
Adoption of Amendment(s) (	CHECK ONE)	
The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

6	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Signature / 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)
	Thomas Williams
	(Typed or printed name of person signing)
	President/CEO
	(Title of person signing)