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JUL 12 2016

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: United Love Center INC
DOCUMENT NUMBER: N14000004336
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shandra Brown
(Name of Contact Person)
(Firm/ Company)
P.D. BOX 470864, Lake Monroe, Florida 32747
Lake Monroe, Florida 32747 (City/State and Zip Code)
Shandra. Lotton @ yahoo. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shandra Brown (Name of Contact Person) at 407.864.6841-407.936.5792 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status (Additional copy is enclosed) \$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

Street Address

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

Articles of Amendment to Articles of Incorporation

Attici	of	6 12
United Love Center, IN		1000 141
	ntly filed with the Florida Dept, of Stat	e) 425 8
N16000004336		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporate	ion adopts the following
A. If amending name, enter the new name of the corporat	tion:	
		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbrevia	ition "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1300 Historic Gold Sanford, Florida	isboro Blvd.
(Principal office address <u>MUST BE A STREET ADDRESS</u>	'Sanford, Florida	33771
C. Enter new mailing address, if applicable:	P.O. BOX 4708	104
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Lake Monroe, FI	orida 32747
D. If amending the registered agent and/or registered offine registered agent and/or the new registered office and registered agent and/or the new registered office and registered agent and registered of the new registered of the registered agent and registered agent agent and registered agent agent and registered agent		of the
Name of New Registered Agent: Sho	ndra Brown	
	5 William Clark	Ave
	(Florida street address)	TYL
<u>New Registered Office Address</u> :	<u>^</u> 1	20001
Jan	rford, FI	lorida <u>32771</u> (Zip Code)
		(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa		f the position.
n N		1
<u>Ska</u>	ndra (ottin)	
\mathcal{T} s	Signature of New Registered Agent, if cha	ınging

Page 1 of 4

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 I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>T</u>	Dannell Fryar	130 Gardenridge Ct. Apt # 108 Winter Springs, FL32708
2) _X Change	(only)	Willie Belle Cotton	3035 William Clark Ave Sanford, Fl 32771
Remove 3) Change Add Remove	5	Paulinda Laster	2025 William Clark Ave Sanford, FL 32771
4) Change Add Remove	5_	Alicia Harris	1224 Golden Gate Circle Sanford, FL 32771
5) Change Add Remove	D	Shandra Brown	2025 William Clark Ave Sanford, FL 32771
6) Change Add		Allen Campbell	P.O. Box 953724 Lake Mary, FL 32195

Change	Gladys Green Andress to 2/8/ Brisson Ave. Santord Fl 307	: 71-846L
change	Harold Lee to:	<u>3</u>
		<u>}41</u>

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

	•	JUNE 22, 2016	
	e date of each ame	adment(s) adoption:signed.	, if other than the
Eff	ective date <u>if appli</u>	cable:	
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not ate on the Department of State's records.	be listed as the
Ado	option of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s was/were sufficient) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	JUNE 22, 2016	
		Wedil Bode Colo	<u> </u>
		(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)	
		WILLIE BELLE COTTON	
		(Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	