N16000004982

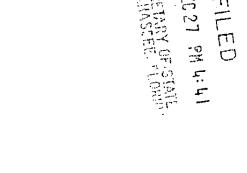
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section **Division of Corporations**

We Do Recover, Inc.	
N16000004982	
DOCUMENT NUMBER:	_
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Maribel Roman	
(Name of Contact Person)	_
We Do Recover, Inc.	
(Firm/ Company)	
3475 S. Ocean Blvd, Unit 510	
(Address)	_
Palm Beach, FL 33480	
(City/ State and Zip Code)	
maribel.roman27@gmail.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Maribel Roman 973-780-7920 at	
(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 \$\sum \\$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** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



December 6, 2016

MARIBEL ROMAN 3475 S OCEAN BLVD., UNIT 510 PALM BEACH, FL 33480

SUBJECT: WE DO RECOVER, INC. Ref. Number: N16000004982

We have received your document for WE DO RECOVER, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 516A00025901

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

We Do Recover, Inc

(Name of Corporation as currently filed with the Florida Dept. of State) N16000004982 (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" or "incorporated" or the abbreviation "Corp." or "Inc." "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: P.O. Box 3602 (Mailing address MAY BE A POST OFFICE BOX) Lantana FL 33465-3602 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: Maribel Roman Name of New Regimered Agent. 3475 S. Ocean Blvd, Unit 510 (Florida street address) New Registered Office Address: Palm Beach Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Einancial 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: XChange X Remove X Add	<u>V</u> .	Tohn Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1)Change	T	Salvatore Lanitieri	5708 NW 56 Manor	_
Add			Coral Springs, FL 33067	
XX Remove				
2) Change				_
Àdű				
Remove				_
3) Change				_
กับป				
Remove				_
4) Change				
Add				_
Remove				
5)Change				
Add			***************************************	_
Remove				_
6) Change		****		
Add				
Remove				

it amending or adding additional Art attach additional sheets, if necessary).	(Be specific)
	Marrier of Community of the St. o
, <u>, , , , , , , , , , , , , , , , , , </u>	

	date of each amendment(s) adoptions document was signed,	MN. 20, 2016	, if other than the
Eff	ective date <u>if applicable</u> :	(no more than 90 days after amendment file da	(0)
	E: If the date inserted in this block ument's effective date on the Depa	does not meet the applicable statutory filing require	,
Ada	option of Amendment(s)	(<u>CHECK ONE</u>)	
6	The amendment(s) was/were adorwas/were sufficient for approval.	ated by the members and the number of votes cast fo	or the amendment(s)
	There are no members or member adopted by the board of directors	s entitled to vote on the amendment(s). The amend	ment(s) was/were
	Dated	-16	-
	have not been	an or vice chairman of the board, president or other selected, by an incorporator—if in the hands of a repointed fiduciary by that fiduciary)	
	Ju	an Rodrigucz (Typed or printed name of person signi	ing)
	Pro	esident (Title of person signing)	
		(True or person signing)	