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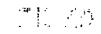
TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Ivocate Network, Inc.		
DOCUMENT NUMBER:		<u> </u>	
The enclosed Articles of Amendment and fee are	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Erik F. Whynot			
	(Name of Contact Pe	rson)	
Community Advocate Network			
	(Firm/ Company)	
300 N Maitland Ave			
	(Address)		
Maitland, FL 32751			
	(City/ State and Zip C	Code)	
agarfinkel@mygwlaw.com			
E-mail address: (to be	e used for future annual repo	ort notification	
For further information concerning this matter, p	lease call:		
Erik F Whynot	at	407-777-8400)
(Name of Contact P			(Daytime Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida D	epartment of S	State:
	ee & \$\Bigsiz\$\$ \$\\$43.75 \text{ Filing Fee } \&\ \text{Certified Copy} \\ (\text{Additional copy is enclosed})\$\$	Certifi Certifi	D Filing Fee icate of Status ied Copy tional Copy is issed)
Mailing Address Amendment Section	Am	eet Address endment Secti	on .

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

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

Articles of Amendment to Articles of Incorporation



N16000010969 (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: (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	PT John Do V Mike Jo SV Sally Sn	<u>nes</u>	
Type of Action (Check One)	Title	Name	Address
1) X Change	PC	Alan Garfinkel	300 N Maitland Ave
Add			Maitland, FL 32751
Remove			
2) Change	D	Gary van der Laan	300 N Maitland Ave
X Add			Maitland, FL 32751
Remove			
3) Change	D	Roger Kesselbach	300 N Maitland Ave
X Add			Maitland, FL 32751
Remove			
4) X Change	D	Erik Whynot	300 N Maitland Ave
Add			Maitland, FL 32751
Remove			
5) Change	T	Stacy Timm	
Add			
X Remove			
6) Change	S	Dionna Coggin	
Add			
X Remove	•		

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)
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	Not Applicable	
The date of each amendmen		, if other than the
late this document was signe	d.	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will return the Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members o adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	7/2016	
Signature	And the second	
have	ne chairman or vice chairman of the board, president or other officer-if directors and been selected, by an incorporator – if in the hands of a receiver, trustee, or copy appointed fiduciary by that fiduciary)	
Εį	pk F. Whynot	
	(Typed or printed name of person signing)	
V	ice President for Community Advocate Network, Inc.	
	(Title of person signing)	