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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	Brown's Harbor, Inc.			_	
DOCUMENT NUMBER	N17000000085				
DOCUMENT NUMBER:					
The enclosed Articles of An	nendment and fee are subn	nitted for filing.			
Please return all corresponde	ence concerning this matte	r to the following	g :		
Fay Noble					
		(Name of Contac	t Person)	·	
Children's Harbor Inc.					
		(Firm/ Comp	oany)		
19425 SW 58th Manor					
		(Address	s)		
Pembroke Pines, FL 33332					
		(City/ State and Z	Zip Code)		
fnoble@childrensharbor.org	5				
	-mail address: (to be used	for future annual	report no	tification)
For further information conc	erning this matter, please	call:			
Fay Noble			954 at		252-3072 x 211
	(Name of Contact Person)	<u> </u>		(Code	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Flori	da Depart	ment of S	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing I Certified Copy (Additional co- enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

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 of

Brown's Harbor Inc.			
(Name of Corporation as cur	rently filed with the Flor	ida Dept, of State)	
N17000000085			
(Document Nu	mber of Corporation (if ki	nown)	
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this Florida Not Fo	r Profit Corporation adopts the	following
A. If amending name, enter the new name of the corporation	ration:		
			The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated	" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRES</u>			
	···	72	201
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		ham faigh The Till	
		2 - The	- CO
		7 Tab. 1 1745. 1 1745.	— <u>`T</u>
		, and a	
D. If amending the registered agent and/or registered on new registered agent and/or the new registered office.		enter the name of the	2: 28
Name of New Registered Agent:		\(\frac{1}{2}\)	
	(Florida street address)		
<u>New Registered Office Address:</u>			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	red Agent: I familiar with and accept	the obligations of the position.	
	Signature of New Regist	ered Agent, if changing	

If emending 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: XChange X Remove X Add	<u>V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	Elizabeth Wynter	19425 S.W. 58th Manor
. X Add			Pembroke Pines, FL 33332
Remove			
2) Change			
Add			
Remove		,	
3) Change			
Add			
Remove			***************************************
4) Change			
Add			
Remove			
5) Change			<u> </u>
Add .			
Remove			
6) Change		·	
Add			
Remove			

f amending or adding additional Artitional Artitional sheets, if necessary).	(Be specific)		
	·		

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	<u> </u>		
· · · · · · · · · · · · · · · · · · ·			
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	date of each amer this document was	dment(s) adoption:signed.	, if other than the
Effe	ctive date <u>if appli</u> c	able:	
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this dat te on the Department of State's records.	e will not be listed as the
Ado	ption of Amendme	ent(s) (<u>CHECK ONE</u>)	
È	The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for the amendment for approval.	nt(s)
	There are no memi adopted by the bo		:re
	Dated	2/14/17 Mund often	
	Signature	Y/V L M -	
		(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator — if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	
		Sherry Stein	
		(Typed or printed name of person signing)	-
		Board Chair	
		(Title of person signing)	_