

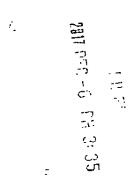
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C. GOLDEN DEC - 7 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Matter, Inc.		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub		 -	
Please return all correspondence concerning this matt	er to the following:		
Susan Dyer			
	(Name of Contact Per	son)	
Alzheimer's Lives Matter, Inc.			
	(Firm/ Company)		
P.O. Box 2173, Palm Beach, FL 33480			
	(Address)		
Palm Beach, FL 33480			
	(City/ State and Zip C	ode)	
susanRdyer@gmail.com			
E-mail address: (to be used	d for future annual repo	rt notification)
For further information concerning this matter, please	eall;		
Susan Dyer	: at _	561	373-3601
(Name of Contact Persor			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida De	epartment of S	state:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is 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	Ame Divi: Clift	et Address indment Sectionsion of Corpo on Building Executive Co	rations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

F1 71

2017 DEC - 6 PH 3: 35

Alzheimer's Lives Matter, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N170000004902 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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 (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 A Add	<u>V</u> <u>Mil</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Tule</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Hyman Marks	9587 Weldon Circle, B104
Add			Tamarac, FL 33321
XRemove			
2) Change	VP	Susan Dyer	P.O. Box 2173
XAdd			Palm Beach, FL 33480
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add	——————————————————————————————————————		
Remove			

attach additional sheet	s, if necessary).	(Be specific)					
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	· 11/29/2017	
The date of each amendment(s) adopt	tion:	if other than the
late this document was signed.	44.5	
Effective date <u>if applicable</u> :	1 /	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will no ment of State's records.	t be listed as the
Adoption of Amendment(s) (CHECK ONE)		
■ The amendment(s) was/were adopt was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
11/29/2017 Dated		
Signature	In Man	
have not been so	n or vice chairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or binted fiduciary by that fiduciary)	
Stephen Mar	ks	
	(Typed or printed name of person signing)	
President		
	(Title of person signing)	