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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: My Father's	l.ove
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
Zeva R. Edmondson	
	(Name of Contact Person)
My Father's Love, Inc.	
	(Firm/ Company)
2960 Leslie Drive	
	(Address)
Orlando, FL 32806	
	(City/ State and Zip Code)
zevaedmondson@yahoo.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
Zeva Edmondson	386 315-0495
(Name of Contact	
Enclosed is a check for the following amount r	nade payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate of 3	Fee & S43.75 Filing Fee & Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address 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 of

FILED

My Father's Love, Inc.	2017 AUG 14 P 4: 25				
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)				
N17264	TALLAHASSEE STATE				
(Document Numb	per of Corporation (if known)				
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the followin				
A. If amending name, enter the new name of the corporat	ion:				
The Idle Treasure, Inc.	47				
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."				
B. Enter new principal office address, if applicable:	2960 Leslie Drive				
Principal office address MUST BE A STREET ADDR	Orlando, FL 32806				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2960 Leslie Drive				
	Orlando, Fl. 32806				
D. If amending the registered agent and/or registered offic	e address in Florida, enter the name of the				
new registered agent and/or the new registered office a	ddress:				
Name of New Registered Agent:					
New Registered Office Address:	(Florida street address)				
_	, Florida				
	(City) (Zip Code)				
New Registered Agent's Signature, if changing Registered	Agent:				
hereby accept the appointment as registered agent. I am fan	riliar with and accept the obligations of the position.				
					
Sig	gnature 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change		 		
Remove				
2) Change Add				
Remove				
3) Change Add				
Remove				
4) Change				
Remove				
5) Change Add			_	
Remove				
6) Change Add				
Remove				

famending or adding add attach additional sheets, if n	ecessary).	(Be specij	lic)	_ _					
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	August 8, 2017	
The date	e of each amendment(s) adoption:	ther than the
	August 8, 2017 date if applicable:	
	(no more than 90 days after amendment file date)	
Note docu	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste t's effective date on the Department of State's records.	d as the
Ado	of Amendment(s) (CHECK ONE)	
	amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) //were sufficient for approval.	
	re are no members or members entitled to vote on the amendment(s). The amendment(s) was/were pted by the board of directors.	
	Dated Chiquest 7, 2017	
	Signature & Ma Company	
	(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)	
	Zeva R. Edmondson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	