N18000002624

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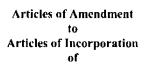


APR 1 6 2018

•					
	•	* <u>COVER LETTER</u>	•		To year
TO: Amendment Section Division of Corporation	ns				
NAME OF CORPORATION	Rescue Impact, Inc.				jo - y ijo ying
N DOCUMENT NUMBER:	18000002624				
The enclosed Articles of Am	endment and fee are sub	mitted for filing.			
Please return all corresponde	ence concerning this matt	er to the following:			
MARIE ROBERSON					
		(Name of Contact Pers	on)		_
		(F) (G			
		(Firm/ Company)			
P O BOX 222742					_
		(Address)			
WEST PALM BEACH, FLI	ROIDA 33422				
		(City/ State and Zip Co	de)		
PASTORMARIEROBERSO	_				_
	-mail address: (to be used		t notification	0)	
For further information conc	erning this matter, please	call:			
MARIE ROBERSON		5 at	61	436-8725	_
	(Name of Contact Persor	n) (z	Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the f	following amount made pa	ayable to the Florida De	partment of S	State:	
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee icate of Status icd Copy tional Copy is issed)	
Mailing A	ddress	Stree	<u>t Address</u>		

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



		2.
Articles o	f Amendment	- (a)
Articles of	to Incorporation	State)
	of	<i>ن</i>
RESCUE IMPACT INC		
(Name of Corporation as currently	filed with the Florida Dept. of S	<u>tate</u>)
V18000002624	of Companyion (if human)	
(Document Number of	of Corporation (if known)	
resuant to the provisions of section 617,1006, Florida Statutes, the nendment(s) to its Articles of Incorporation:	his <i>Florida Not For Profit Corpo</i>	ration adopts the following
. If amending name, enter the new name of the corporation	<u>:</u>	
Α		The new
une must be distinguishable and contain the word "corporation Company" or "Co." may not be used in the name.	" or "incorporated" or the abbre	eviation "Corp." or "Inc."
	A	
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)	•	
· 		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	A	
_		
_		
If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	ddress in Florida, enter the nan	ne of the
Name of New Registered Agent:		
risine of the negligible agent.		
	(Florida street addre	33)
New Registered Office Address:		
		P1. 11
	(City)	, Florida (Zip Code)

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	<u>V</u> <u>Mil</u>	nn <u>Doc</u> ke Jones l <u>y Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	P/CEO	LAKEESHA T BOOKER	P O BOX 222742
Add			WEST PALM BEACH, FL
X Remove			33422
2) Change	P/CEO	MARIE ROBERSON	P.O. BOX 222742
X Add			WEST PALM BEACH, FL
Remove			33422
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
NA	
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W	
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	04/05/2018	
The date of each amends		, if other than the
date this document was sig	aned.	
	04/05/2018	
Effective date <u>if applicat</u>		
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will no on the Department of State's records.	t be listed as the
Adoption of Amendment	(s) (<u>CHECK ONE</u>)	
The amendment(s) w was/were sufficient for	as/were adopted by the members and the number of votes cast for the amendment(s) or approval.	
☐ There are no member adopted by the board	rs or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
0- Dated	4/05/2018	
	Main	
Signature	Modelyntones	
ha	y the chairman or vice chairman of the board, president or other officer-if directors are not been selected by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)	
	MARILYN JONES	
	(Typed or printed name of person signing)	
	SERETARY	
	(Title of person signing)	