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A. RAMSEY JAN 2 6 2022

COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: FINDING FAMIL	Y PHOTOS INC	
DOCUMENT NUM	820000013919		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	MARY ODAY		
		Name of Contact Persor	1
	FINDING FAMILY PHOTO	S INC	
		Firm/ Company	-
	PO BOX 420665		
		Address	
	KISSIMMEE FL 34742		
	<u></u>	City/ State and Zip Code	
	Findingfamilyphotosinc@gm	nail.org	
	• • • • • • • • • • • • • • • • • • • •	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se cali: ar (407	405-6756
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ailing Address	<u>Street</u>	Address
	nendment Section		ment Section
	vision of Corporations), Box 6327		n of Corporations entre of Tallahassee
), B0X 0527 Bahasana FI 32314		& Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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FINDING FAMILY PHOTOS INC.

(Name of Corporation as currently filed with the Florida	Dept. of State)	一样 医外部性 医二十二
N20000013919		
(Document Num	per of Corporation (if know	n)
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For Pr</i>	ofit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
NA		The new
NA name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	uion" or "incorporated" o.	r the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	ੂਮੀ	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	()	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	2 <u>8</u>	
		- .
D. If amending the registered agent and/or registered off	ice address in Florida, ent	er th <u>e name of the</u>
new registered agent and/or the new registered office	address:	
Name of New Registered Agent: 20 P.		
	(Floride	(street address)
New Registered Office Address:		
NA		Florida
7	(City)	, Florida (Zip Code)
No. 10 April 1997 Apri		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	iniliar with and accept the	obligations of the position.
	·	
MA		
	lignature of New Registerea	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	<u>V</u>	<u>John Doc</u> Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>S</u>	Jessica Ruff	PO Box 420665 Kissimmee FL 34742
XRemove			
2) Change Add	<u>S</u>	Colleen C Clardy-Dalton	PO Box 420665 Kissimmee FL 34742
Remove 3)		<u></u>	
4) Change Add		<u> </u>	
Remove 5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		nal Articles, enter change(s) here: sary). (Be specific)	
NA			
			

		-
		-
		<u>, </u>
		
The date of each amendment(s) adopti	n:	if other than the
date this document was signed		
rion of the included of 22		
Елгестіче date <u>п аррисавіе</u> : /2/11	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departr	es not meet the applicable statutory filing requirenent of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte was/were sufficient for approval.	I by the members and the number of votes east for	the amendment(s)

Dated	13.38.3631
Signature	71 in 1. Silve
	By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, o
	other court appointed fiduciary by that fiduciary)
	other court appointed fiduciary by that fiduciary) /

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were