N45097

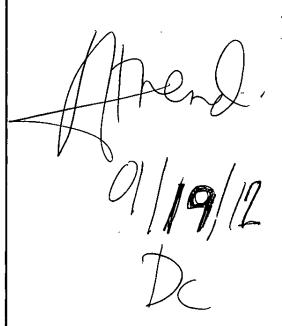
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Alcoholics Ano	nymous of Greater Miami, Inc.
DOCUMENT NUMBER: N45097	
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to th	e following:
Jennifer Rathjens	
(Name	e of Contact Person)
Alcoholics Anonymous of G	reater Miami, Inc.
(F	Firm/ Company)
299 Alhambra Cir. # 309	
	(Address)
Coral Gables, FL 33134	
(City/	State and Zip Code)
aamiamidade@bells	outh.net
E-mail address: (to be used for fu	ture annual report notification)
For further information concerning this matter, please call:	
Jennifer Rathjens	_{at} 305 461-2425
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	to the Florida Department of State:
S35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & B\$43 Certificate of Status Certified Cop (Ad enclosed)	by Certificate of Status ditional copy is Certified Copy (Additional Copy is
	enclosed)
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

Alcoholics Anonymous of Greater Miami, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) N45097 (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: N/A Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida

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.

(City)

Signature of New Registered Agent, if changing

(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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add _X Remove	D	Lori Hester	299 Alhambra Cir. # 309 Coral Gables,FL 33134
2) Change Add Remove	C	Sofia Larraz	299 Alhambra Cir. # 309 Coral Gables,FL 33134
3) X Change Add Remove	TR	Therman Howard Jr.	299 Alhambra Cir. # 309 Coral Gables,FL 33134
4) X Change Add Remove	TR ·	Mary Sluzis	299 Alhambra Cir. # 309 Coral Gables,FL 33134
5) X Change Add Remove	0	Jennifer Rathjens	299 Alhambra Cir. # 309 Coral Gables,FL 33134
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)							
(attach additional sheets, if necessary).	(Be specific)						
N/A							

The	date of each amendmen	nt(s) adoption: 01/01/2012	
Effective date <u>if applicable</u> :		01/01/2012	
		(no more than 90 days after amendment file date)	
Adc	option of Amendment(s)	(CHECK ONE)	
=	The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) approval.	
	There are no members or adopted by the board of o	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated 01/	/09/2012	
	Signature	June	
	have r	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Jennife	er Rathjens	
		(Typed or printed name of person signing)	
	Office I	Manager	
		(Title of person signing)	