N50014

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DIVISION OF CORPORATIONS

Amend, 3/5/12

COVER LETTER

TO: Amendment Section Division of Corporations FOOD HODICTS HNONYMOUS. N50064 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Patricia Herlehy FOOD ADDICTS ANONYMOUS, JW PRIMA VISTA BIVD. SU PORT ST LUCIE, FL 34983
(City/ State and Zip Code) F-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \Bigcup \$43.75 Filing Fee & Certificate of Status Certified Copy

(Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status 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

Articles of Incorporation	
FOOD ADDICTS ANONYMOUS, INC. (Name of Corporation as currently filed with the Florida Dept. of State)	
N50064	
(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:	ıg
A. If amending name, enter the new name of the corporation:	
The no 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.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 2	
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:	: 5
Name of New Registered Agent:	در
New Registered Office Address: (Florida street address)	
, Florida	
(City) (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	

Page 1 of 4

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.

EVERETT, MA DA149 EVERT DA149 E	Example: X Change	<u>PT</u>	John Doe	
Type of Action (Check One) Title Name Address LEVY, DORENE 34 SWINDON CT. TOMS RIVER NOT. Remove Change Add Remove TAYLOR, AMIE 1995 OLD CREK RD. LEVY, DORENE 34 SWINDON CT. TOMS RIVER NOT. LEVY, DO	X Remove	<u>v</u>	Mike Jones	
(Check One) 1)	_X Add	<u>sv</u>	Sally Smith	
Add Remove TAYLOR, AMIE 199 S OLD CREEK RD		<u>Title</u>	Name	<u>Addres</u> s
Add Remove 3) Change Add Remove 4) Change Add Remove 4) Change Add Remove 5) Phange Add Remove 6) Change Add Remove 7 BROWNELL, TERESA 4583 31ST AVE NORTH Add Remove	/ dd	T	LEVY, DORENE	34 SWINDON CT. TOMS RIVER NJ
Change Add Remove	Add	<u>T</u>	TAYLOR, AMIE	199 S OLD CREKRD. VERNON HIUS, IL
EVERETT, MA DA149 EVERT DA149 E	3) Change Add	I	SCHOLL, CHUCK	333 NORTH AVENUE TAMMADGE OH
Add Remove WALNUT CREEK, CFT 94596 6) Change T BROWNELL, TERESA 4583 315T AVE NORTH Add KELLY ST PETERS BURG, FL	/ /dd	T	TAYLOR, DIANE	16 CLEVELAND AVENUE EVERETT, MA 02149
Remove KEUEY ST PETERS BOTHS; +L	Add	I	VIANU, LIBBY	82 EL CAMINO CORTO WALNUT CREEK SOLO
	Add	エ	BROWNELL, TERESA KELLEY	4583 315 AVE NORTH ST PETERSBURG, FL 33713

(atta	mending or addinach additional shee	ts, if necessary).	(Be specific)				
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The date of each amendment(s) adoption: 2/27/12					
Effective date <u>if applicable</u> :	2/27/17				
	(no more than 90 ddys after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were adop was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)				
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were				
Dated	2/27/12				
Signature	1940 //				
have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator — if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)				
	JOESEPH DAVID				
(7	Typed or printed name of person signing)				
	TREASBRER				
((Title of person signing)				