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COVER LETTER

TO: Amendment Section Division of Corporations

Lifeline Fami	ily Center, Inc.
N95000000555	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
Meghan DeLuca	
	(Name of Contact Person)
Lifeline Family Center, Inc.	
	(Firm/ Company)
907 SE 5th Avenue	
	(Address)
Cape Coral, FL 33990	
	(City/ State and Zip Code)
director@lifelinefamily.org	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter.	, please call:
Meghan DeLuca	237 242-7238 at
(Name of Contact	
Enclosed is a check for the following amount i	made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of \$	
Mailing Addrose	Stroot Addrocs

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Lifeline Family Center, Inc.			
(Name of Corporation as currently filed with the	e Florida Dept. of State)		
N95000000555			
(Docum	nent Number of Corporation (i	known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not</i>	For Profit Corporation adopts the f	ollowing
A. If amending name, enter the new name of th	e corporation:		
	_		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	<u>e</u> .	ted" or the abbreviation "Corp." or	The new " or "Inc."
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET</u>)			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BON)		
		Zan d	20
			20 - -
			-
D. If amending the registered agent and/or regi	istered office address in Flori	da, enter the name of the	• .5 O'i
new registered agent and/or the new register			9 (1
Name of New Registered Agent:	Meghan DeLuca		
<u>мате ој wew кедімитей ядет</u> .	907 SE 5th Avenue		
		(Florida street address)	
New Registered Office Address	:	(2 no ma de ce) como como	
	Cape Coral	Florida	
	(Ciņ)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent	nt. I am familiar with and acc $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	1	
-	Signature of New Reg	nstered 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	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P/D</u>	Katherine Miller	5145 Santa Rosa Court Cape Coral, FL 33904
 × Remove 2) Change × Add 	<u>P/I)</u>	Meghan DeLuca	4121 NW 34th Lane Cape Coral, FL 33993
Remove 3) Remove	<u>s</u>	Meghan DeLuca	1135 SW 17th Street Boca Raton, FL 33486
4) Change Add			
Remove 5) Change Add			
Remove 6)ChangeAdd			
E. If amending or additional she	ng additional Ar ets. if necessary).	ticles, enter change(s) here: (Be specific)	

•		
-		
		····
		, <u>,</u>
The date of each amendmen	(s) adoption: September 22, 2020	if other than the
date this document was signed	(5) 400ption.	It other than the
	September 23, 2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the document's effective date inserted in the document's effective date on the document date of the document date o	is block does not meet the applicable statutory filing requirem he Department of State's records.	ents, this date will not be listed as the

(CHECK ONE)

Adoption of Amendment(s)

Dated	October 22, 2020
Pateti	
Signatur	e Mll
	(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, or other court appointed fiduciary by that fiduciary)
	Meghan DeLuca
	(Typed or printed name of person signing)