N9700000414

(Red	questor's Name)	
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03/16/15--01043--007 **35.00

SECRETARY OF STATICHED OF CORPORATIONS

Amend 03,18,15

COVER LETTER

TO: Amendment Section Division of Corporations Forum Recreation Center, INC N97000004164 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marcela Broughton (Name of Contact Person) (Firm/ Company) 1300 NE 191 ST UNIT A112 (Address) Miami, FL 33179 (City/ State and Zip Code) marcelabroughton@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marcela Broughton (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is

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

Enclosed)

Articles of Amendment

to
Articles of Incorporation
of

Form Re	ecrean	ion Co	enter	INC.	
(Name of Corporation as current	ly filed with the Flor	ida Dept. of State	4/101	•	
(Doc	ument Number of Cor	poration (if known) 11 4 7		
Oursuant to the provisions of section 617. Immendment(s) to its Articles of Incorporate		s, this <i>Florida Not I</i>	For Profit Corporal	ion adopts the fo	ollowing
A. <u>If amending name, enter the new na</u> N/A	ame of the corporatio	on:			
					The new
name must be distinguishable and contain "Company" or "Co." may not be used in		on" or "incorpora	ted" or the abbrevio	ntion "Corp." or	· "Inc."
" " " " " " " " " " " " " " " " " " " "					
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		·			
Trucipal office address MOST BE AS	<u>IKEET ADDKESS</u>)				
					O.
	-				WEIGH OF CORPO
C. Enter new mailing address, if appli					57 P.
(Mailing address <u>MAY BE A POST (</u>	JFFICE BOX)		**	· · ·	3 93
					6 50
					星 翠
					• •
 If amending the registered agent an new registered agent and/or the nev 			a, enter the name	<u>of the</u>	J.
Name of New Registered Agent:	• • • • • • • • • • • • • • • • • • • •				
					
New Registered Office Address:		Florida street address)			
			121 a.m.i.d.a.		
	(City)		, Florida	(Zip Code)	<u></u>
				(,	
New Registered Agent's Signature, if cl hereby accept the appointment as regist			pt the obligations o	f the position.	
	Ç		,		
	Signature of New R	Registered Avent if	changing		
	Signature of Hell II	Commencer received	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		

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.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>T</u>	Olga Agasso	1350 NE 191 ST
Add			UNIT D203
Remove			Miami, FL 33179
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
N/A	
	- ··· · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: MARCA 2, 20/5 (no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
(Typed or printed name of person signing)	
(Title of person signing)	
Treasurer asked to betromo for personal Reasons.	Ve
for personal Reasons.	