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DIVISION OF CORPORATIONS

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COVER LETTER

Division of Corporations lubs of lanzania INC DOCUMENT NUMBER: 1 RS 31-03018 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Barbara Grave
(Name of Contact Person) ubs of (Firm/Company) OQS (Address) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) 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 & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) enclosed)

Mailing Address

TO: Amendment Section

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

Mothers Club of (Name of Corporation as currently)	f Tanzar	nia, IN	0
TRS ID & 31-030 (Document Number of Corpora	18 N9	8000X	380
Pursuant to the provisions of section 617.1006, Florida Statute following amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Ca</i>	prporation adopts the	
A. If amending name, enter the new name of the corporation of the corp	corporation" or "incorporated"	or the abbreviation	- 4
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)		11 %	DIVISION
		PH 12:	FILED ST
D. If amending the registered agent and/or registered office			ATTE.
new registered agent and/or the new registered office as Name of New Registered Agent:	ioress:	<i>-</i>	₹;
New Registered Office Address:	Florida street address)		
	, Flori	da	
Nam Danistand Apart) Cinnatura if share! - Mariatana	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered in hereby accept the appointment as registered agent. I am fan		ions of the position.	

Page 1 of 4

Signature of New Registered Agent, if changing

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)		<u>Name</u>		Address	
1)					,
2)	_				
3)					· · · · · · · · · · · · · · · · · · ·
4)	*****				
5)	******				
6)	_	Liver to the state of the state			
If REMOVING	an officer a	nd/or director, please list	the title(s) and n	ame of the officer/direct	tor to be removed:
Title(s)	Name		Title(s)	<u>Name</u>	
1)			4)		
2)			5)		·· <u>·</u>
3)			6)		

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
(шист иминоти знесы, у несезиту).	(so speeding)
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The date of each amendment(s) adoption:
Effective date if applicable: SAME (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 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)
Barbara Grove (Typed or printed name of person signing) Director (Title of person signing)
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