# P0800001583

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

SEP 1.5 2015

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Resilience Counseling Center, Inc.					
DOCUMENT NUMBER: P08000001588					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corre	spondence concerning this mat	ter to the following:			
Philip S. Kaprow, Esq.					
		Name of Contact Persor	1		
Vose Law Firm, LLP					
	Firm/ Company				
324 W. Morse Blvd.					
		Address			
	Winter Park, Fl	orida 32789			
		City/ State and Zip Cod	2		
bswims@voselaw.com					
	E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
Jeffrey	Cannon	at ( 3/7	de & Daytime Telephone Number		
Name	of Contact Person	Arca Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
M	ailing Address	Street	Address		

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# Articles of Amendment to Articles of Incorporation

Resilience Counseling Cent	er, Inc.			
(Name of Corporation as currently file	ed with the Florida Dept. of St	ate)		
P08000001588				
(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Con	rporation adopts the following	; amendment(s) to	
A. If amending name, enter the new name of the co	rporation:			
N/A			The new	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	" "Inc," or "Co". A professionabbreviation "P.A."	or "incorporated" or the ab mal corporation name must c	obreviation	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>N/A</u>		14 SEP - 8 SECRETAR TALLAHAS	
D. If amending the registered agent and/or register new registered agent and/or the new registered		nter the name of the	SEP -8 PM 3: 30 CRETARY OF STATE LAHASSEE, FLORID	FILED
Name of New Registered Agent N/A			DA DA	
****	(Florida street address)			
New Registered Office Address: N/A		, Florida N/A	_	
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		he obligations of the position.		

Signature of New Registered 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	PT John	<u>Doe</u>			
X Remove					
X Add					
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	VD	Karen A. Peters	1759 W. Broadway Ave.		
Add			Suite 3		
Remove			Oviedo, FL 32765		
2) Change	PSTD	Jeffrey G. Cannon	3013 Seigneury Drive		
Add			Windermere, FL 34786		
Remove					
3) Change			<del></del>		
Add					
Remove					
4) Change	<del></del>				
Add					
Remove					
5) Change	-				
Add					
Remove					
6) Change					
Add					
Remove					

	If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
/A					
				··	
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				·····	
<del></del>	<del></del>		··· <del>-</del>	<del></del>	
		<del></del>	<del></del>	·	
If an amendment	provides for an ex	cchange, reclassifi	cation, or cancel	lation of issued sha	res,
provisions for in	nplementing the an	mendment if not c	ontained in the a	mendment itself:	
(if not applie	uoie, maicaie wa)	•			
(if not applic		· · · · · · · · · · · · · · · · · · ·	<del></del>		
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The date of each amendment(s) ac	loption:	_, if other than the
date this document was signed.		
Effective date if applicable:		<del></del>
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated August	1, 2014	
	<del></del>	
Signature(		
	director, president or other officer – if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
ирроп	ned fiddelary by that fiddelary,	
	Jeffrey G. Cannon	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	