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COVER LETTER

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TO: Amendment Section Division of Corporations		2020 mm 22 PH 2:47
NAME OF CORPORATION: <u>Rélatio</u> DOCUMENT NUMBER: <u>Po 80 0 C</u>	on ship Development 00 57532	r Irc
The enclosed Articles of Amendment and fee a	are submitted for filing.	
Please return all correspondence concerning thi	is matter to the following:	
Sic	an E Shepard Name of Contact Person	.
	Firm/ Company Ma Ave Suite Address K FL 327 City/ State and Zip Code Velop (O a ma. 1, Co) be used for future innual report notifica	
For further information concerning this matter,	at (427)	115-0206
Name of Contact Person		aytime Telephone Number
Enclosed is a check for the following amount n	nade payable to the Florida Department	of state:
\$35 Filing Fee	tus Certified Copy Ce (Additional copy is Ce enclosed) (Ad	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314		ection

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

- Relationship Develop	Ment, Inc. (filed with the Florida Dept. of State)
P 080000 57532	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation: Center for Pelationship name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	Dlve/opment Inc_The new ompany," or Incorporated" or the abbreviation "Corp" professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<i>N/</i> D
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A 2 711 1. 05
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the hame of the
Name of New Registered Agent N / A	· · · · · · · · · · · · · · · · · · ·
(Florida str	eet address)
New Registered Office Address: \/ \/ \/ A	, Florida (City)
	icht)
New Registered Agent's Signature, if changing Registered Agent, I hereby accept the appointment as registered agent. I am familiar v	in the control of the position.
IV JA Signature of New R.	egistered Agent, if changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (

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	<u>PT</u>	John Do	<u>oe</u>			: 10/	
X Remove	<u>V</u>	Mike Jo	ones		1000	licapio	
X Add	<u>sv</u>	Sally Sn	nith	Not	HI		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	170		Address	
I) Change		<u> </u>					
Add							 -
Remove							
2) Change							
Add							
Remove 3) Change							
Add							
Remove							
4) Change							
Add							
Remove							
5) Change			<u></u>				
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6) Change	- 						
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Remove							
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. If an amendment	provides for an	exchange, reclassi	fication, or cancel	ation of issued sh	ares,
<u>provisions for it</u> (if not applie	nplementing the cable, indicate N/2	amendment if not	contained in the a	menument usen:	
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	175+	Applica	<u>)12</u>	•	
				 	
		.			
				<u>.</u>	

The date of each amendment(s) addate this document was signed.	option:	(0/20/2020	, if other than the
Effective date if applicable:			
	(no mor	re than 90 days after amendment file d	ate)
Note: If the date inserted in this blo document's effective date on the Dep			nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ON	<u>NE</u>)	
★ The amendment(s) was/were adopaction was not required.	oted by the incorpora	ators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf		ders. The number of votes cast for the	amendment(s)
☐ The amendment(s) was/were appropriately provided for a	oved by the shareho each voting group en	olders through voting groups. The followittled to vote separately on the amend	owing statement ment(s):
"The number of votes cast f	or the amendment(s)) was/were sufficient for approval	
by			
	(voting group	p)	
selected	120/2000 ector, president or o by an incorporator, and fiduciary by that f	other officer – if directors or officers ha	ive not been or other court
-	Susua (Typed or	r printed name of person signing)	
_	Presid		
	(Title of p	person signing)	