Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000120977 3)))



H200001209773ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Τo	:
----	---

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BURNS LAW OFFICES, P.A.

Account Number : T20140000036 Phone : (305)733-8223

Fax Number : (866)883-7019

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Ado	Address:			

COR AMND/RESTATE/CORRECT OR O/D RESIGN BETTER FAMILY INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

V CHIKEP

MAY 0 i 2020

Electronic Filing Menu

Corporate Filing Menu

Help

Lot 1

(((H20000120977 3)))

Articles of Amendment to Articles of Incorporation of

A CL L A A TO		
<u>on as currently filed with the Flori</u>	da Dept, of State)	
nent Number of Corporation (if know	vn)	
a Statutes, this Florida Profts Corpor	ration adopts the following	ng amendment(s) to
progration:		
orporation," "company," or "incorpor " or "Co". A professional corpor eviation "P.A."	orated" or the abbreviati ration name must conta	The new ion "Corp.," in the word
ne Dress)		
		COZO APA
<u></u>		
office address:	the name of the	14. S
		-
		_
(Florida street address) ON	, Florida 34432	
(City)	(Zip	Code)
	extinutes, this Florida Profit Corporation: Deporation: Deporation, "company, or "incorporation "Co". A professional corporation "P.A." DRESS) DRESS) End office address in Florida, enter office address: COOK TH WILLIAMS ST. #8-109 (Florida street address) ON	prporation, ""company," or "incorporated" or the abbreviati " or "Co". A professional corporation name must contain viation "P.A." PRESS) Ted office address in Florida, enter the name of the office address: COOK TH WILLIAMS ST. #8-109 (Florida street address) ON, Florida 34432

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(((H200001209773)))

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.

X Change	<u>LJ.</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P,D	MARTIN HILL	683 CYPRESS GREEN CIR.
Add			WELLINGTON, FL 33414
X Remove			
2) Change	T,S,D	SARAH HILL	683 CYPRESS GREEN CIR.
Add			WELLINGTON, FL 33414
X Remove 3) Change	P	CARMAN COOK	11150 NORTH WILLIAMS ST
XAdd			#8-109
Remove			DUNNELLON, FL 34432
4) Change	S	SHARON FRANKLIN	6784 OLD FEDERAL RD
XAdd			QUINCY, FL 32351
Кеточе			
5) Change			
Add			
Remove			
6) Change			-
Add			
Kemove			

. If amending or adding additional Articles, enter change(s) here:	(((1120000120977 3)
(Attach additional sheets, if necessary). (Be specific)	
	
	······································
If an amendment provides for an exchange, reclassification, or cancell	ation of issued shares.
provisions for implementing the amendment if not contained in the a	mendment itself:
(if not applicable, indicate N/A)	

			(((H20000120977 3)))
		nt(s) adoption:	, if other than the
date this documer	nt was sign	:d.	
Effective date <u>if</u>	applicable	:	
		(no more than 90 days after amenament file date)	
		this block does not meet the applicable statutory filing requirements, this the Department of State's records.	date will not be listed as th
Adoption of Am	endment(s	(CHECK ONE)	
The amendme action was not		vere adopted by the incorporators, or board of directors without shareholder a	ction and shareholder
	•	were adopted by the shareholders. The number of votes cast for the amendme were sufficient for approval.	nt(s)
		ere approved by the shareholders through voting groups. The following state ded for each voting group entitled to vote separately on the amendment(s):	ement :
"The nu	mber of vot	es cast for the amendment(s) was/were sufficient for approval	
ъу		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		(voting group)	
		· •	
	Dated	APRIL 24TH 2020	
•	E:	MIM	
	Signature	(By a director, president or other officer - if directors or officers have not bee	n
		selected, by an incorporator - if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	
	••	MARTIN HILL	
		(Typed or printed name of person signing)	
		PRESIDENT/DIRECTOR	
		Crists of	