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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: RECOVERY CONSULTING NETWORK INC

DOCUMENT NUMBER: P13000048 187

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSEPH TOLAND

Name of Contact Person

RECOVERY CONSULTING NETWORK INC

Firm/ Company

6699 N FEDERAL HIGHWAY SUITE 105

Address

BOCA RATON, FLORIDA, 33487

City/ State and Zip Code

JOSEPH@RECOVERY-CAPITAL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH TOLAND

at (561) 859-2744

Area Code & Daytime Telephone Number

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 & Certificate of Status

□\$43.75 Filing Fee & Certified Copy (Additional copy is

enclosed)

Certificate of Status Certified Copy (Additional Copy is enclosed)

□\$52.50 Filing Fee

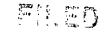
Mailing Address

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 Taliahassee, FL 32301

Articles of Amendment Articles of Incorporation



RECOVERY CONSULTING NETWORK INC

(Name of Corporation as currently filed with the Florida Dept. of State)

RECOVERY CONSULTING NETWORK INC



(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

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word "corporation," "compar Corp," "Inc," or "Co". A proj		
the abbreviation "P.A."	·	
able:		
<u>ADDRESS</u>)		

(BOV)		
<u>BUA</u>)		
istered office address in Florid	la. enter the name of the	
red office address:		
	W	
(Florida street address)		
(Florida street address)	, Florida	
<u> </u>	the abbreviation "P.A." able: ADDRESS) BOX) istered office address in Florid	able: ADDRESS) BOX) Interest of the state of the stat

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)

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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 Joi	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	SV Sal	lly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	СМО	George DiCiurcio	6699 N Federal Highway
Add			Suite 105
Remove			Boca Raton, FL, 33487
2) Change	CFO	Michael Ferry	6699 N Federal Highway
Add			Suite 105
Remove			Boca Raton, FL, 33487
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change	-		
Add			
Remove			APPENDING TO THE PROPERTY OF T
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
·	
	
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/24/2014	
Signature	
(By a director, president of other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Joseph Toland	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	