## PIB OCCCO 3551

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: The Love Camp In	<u>c</u>			
	BER: P18000003551				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	The Love Camp Inc -	ara Keitz (	Playford		
		Name of Contact Persor			
	The Love Camp Inc				
		Firm/ Company			
	3601 76 st N				
	Address				
Saint Petersburg, FL 33710					
		City/ State and Zip Code			
For further informatio	E-mail address: (to be us	sed for future annual report	notification)		
Tara Keitz-Playford		at (	537-6763		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.O	ching Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

The Love Camp Inc					
(Name o	of Corporation as currently	filed with the Florida Dept. of Sta	<u>te</u> )		
P18000003551					
	(Document Number of	Corporation (if known)	-		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the	e followin <sub>i</sub>	g amendi	ment(s) to
A. If amending name, enter the new n	ame of the corporation:				
				The ne	ρw
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A			– on "Corp.	··
B. Enter new principal office address, (Principal office address MUST BE A S					_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			7.00 7.00 7.00 7.00 7.00 7.00 7.00 7.00	2020 APR I	
D. If amending the registered agent ar			<u></u>	PM 12: 29	
new registered agent and/or the new	w registered office address:			29	
Name of New Registered Agent	Tara Keitz-Playford			_	
	3601 76 st N				
	(Florida stre	et address)		-	
New Registered Office Address:	Saint Petersburg	, Florid	33710		
New Negatieres Office Hauress.	7	(City)	(Zip C	Code)	-
New Registered Agent's Signature, if call hereby accept the appointment as registered.	tered agent. I am familiar w	vith and accept the obligations of the	position.	_	
	Signature of New R	gistered Agent, if changing			

Check if applicable

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

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)

Example:

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>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	Secreta	r -	William Sanchez	3601 76 st N
Add				Saint Petersburg, Fl 33710
X Remove				
2) Change		=~-		
Add				
Remove 3) Change		_		
Add				·····
Remove				
4) Change		_		
Add				
Remove				<del></del>
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

ruavii aaa	ng or adding additional litional sheets, if necessar	ry). (Be specific)			
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<u>provisions</u>	ndment provides for an some some some some some some some some	amendment if not o	ication, or cancella contained in the au	ation of issued shar mendment itself:	<u>'es.</u>
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03/01/2020	20 4 1 4
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
03/01/2020	
Effective date <u>if applicable</u> :  (no more than 90 days after	amendment file date)
(no more man 20 days ape.	unchances for duty
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of direction was not required.	rectors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	f votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately.	
"The number of votes cast for the amendment(s) was/were sufficien	t for approval
by	**
(voting group)	······································
04/03/2020	
Dated	
•	_
Signature	
(By a director, president or other officer – if dire	ctors or officers have not been
selected, by an incorporator – if in the hands of	
appointed fiduciary by that fiduciary)	
Tara Keitz-Playford	
(Typed or printed name of pe	rson signing)
President	
(Title of person signing)	