(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: CRC Support Serv	rices, Inc.	_
DOCUMENT N	UMBER:		····
The enclosed Arti	cles of Amendment and fee are su	abmitted for filing.	
Please return all c	orrespondence concerning this ma	tter to the following:	
	Carol Wauchope		
		Name of Contact Person	n
		Firm/ Company	
	1251 NE 10th St.		
		Address	
	Ocala, FL 34470		
		City/ State and Zip Cod	e
c	arol.wauchope@yahoo.com		
_	E-mail address: (to be us	sed for future annual report	notification)
For further inform	ation concerning this matter, pleas	se call:	
Carol Wauchope		at (³⁵²) 239-0447
Name of Contact Person Area Code & Day			de & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	© \$43.75 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)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tullahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec, F1, 32301



January 4, 2019

CAROL WAUCHOPE 1251 NE 10TH ST OCALA, FL 34470

SUBJECT: CRC SUPPORT SERVICES, INC

Ref. Number: P18000005930

We have received your document for CRC SUPPORT SERVICES, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filled and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed by a director, president or 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

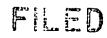
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 819A00000246

www.sunbiz.org

Articles of Amendment + to Articles of Incorporation of



CRC Support Services, Inc.		2019 JA	N24 PM 2:38
(<u>Name</u> (of Corporation as current	y filed with the Florida Dept. of	(State)
·		TALL	AHASSEE, FI
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopt	is the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
CRW Support Services, Inc.			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa B. Enter new principal office address,	nation "Corp," "Inc," or ' ition," or the abbreviation '	Co". A professional corporation	
(Principal office address MUST BE A S			
			- · · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			
D. If amending the registered agent an	id/or registered office odd	recs in Florida, enter the name o	of the
new registered agent and/or the ne			n the
Name of New Registered Agent		_	
Name of New Registered Agent	1251 NE 10th St.		,
	(Florida st	eet address)	
	Ocala	ŕ	. 34470
New Registered Office Address:		, FI:	orida
		(4.97	()
New Registered Agent's Signature, if c	hanaina Registered Agent		
I hereby accept the appointment as regist			the position.
**************************************	Carol We	uchope	·
	Signature of New 1	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 = ChiefExecutive 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.

Mike Jones. + as Kenny	D, terms time.		
Example: X Change	<u>PT</u> <u>Jol</u>	hn Doe	
X Remove	<u>y</u> <u>M</u>	ikę Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action	Title	<u>Name</u>	Address
(Check One)		Carol Cornell	1251 NE 104n St. Ocala, FL 34470
Add			Ocala, PL of
X Remove			
2) Change		Carol Wanchope	1251 NE 10th St. Ocala, FL 34470
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additi</i>	or adding additional A onal sheets, if necessary,). (Be specific)			
					
			 		
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				<u> </u>	
					
					
			<u></u>		
					
provisions l	ment provides for an exfor implementing the arapplicable, indicate N/A)	nendment if not c	cation, or cancella ontained in the an	ation of issued sha nendment itself:	re <u>s.</u>
					
			. <u>-</u>		
			<u></u>		
					<u> </u>

The date of each amendment(s) ac	dantion: 12-18-18	, if other than the
date this document was signed.	Johnson.	
Effective date <u>if applicable</u> :	12-18-18 (no more than 90 days after amendment file dat	
	(no more than 90 days after amendment file dat	le)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirement appartment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the an ifficient for approval.	nendment(s)
	proved by the shareholders through voting groups. The follows each voting group entitled to vote separately on the amendment	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	······································	
	(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 add action was not required.	opted by the incorporators without shareholder action and shar	reholder
Dated	20-19	
Signature(20-19 Carol R Cornell	
(By a d	irector, president or other officer - if directors or officers have	
	 d. by an incorporator – if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary) 	other court
	Carol Cornell (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	