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### COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: FAMILY SERVIC	ES DOWNTOWN CORP			
DOCUMENT NUMI					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	NILTON JIMENEZ				
	Name of Contact Person				
	FAMILY CENTER DOWNTOWN CORP				
	Firm/ Company				
	37 N ORANGE AVE STE 225				
		Address			
	ORLANDO, FL 32801				
		City/ State and Zip Code	2		
	familycenterdowntown@ggm	nail.com			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
NILTON JIMENEZ		at (	442-3456		
Name of Contact Person			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	□\$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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

#### Articles of Amendment to Articles of Incorporation of

#### FAMILY SERVICES DOWNTOWN CORP

( <u>Name of Corporation as current</u>	tly filed with the Florida Dept. of Sta	te)
23000045588		
(Document Number	of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	s Florida Profit Corporation adopts the	e following amendment
. If amending name, enter the new name of the corporation: AMILY CENTER DOWNTOWN CORP		The new
ume must be distinguishable and contain the word "corporation," ' Inc.," or Co.," or the designation "Corp," "Inc." or "Co", chartered," "professional association," or the abbreviation "P.A.	A professional corporation name mu	bbreviation "Corp.,"
. Enter new principal office address, if applicable:	37 N ORANGE AVE	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	STE 225	
	ORLANDO, FL 32801	202
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1
		ra
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		<u>ي</u>
Name of New Registered Agent	. <del></del>	
(Florida si	treet address)	
New Registered Office Address:	, Florida (City)	a (Zip Code)

Check if applicable

 $<sup>\</sup>square$  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)

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			**************************************
Add			
Remove			
6) Change			
Add			
Remove			

Attach add	ng or adding additional Aiditional Aiditional sheets, if necessary,	. (Be specific)				
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f an amei	ndment provides for an ex	change, reclassit	lication, or cance	ellation of issued	shares,	
provision	as for implementing the an or applicable, indicate N/A)	nendment if not	contained in the	amendment itse	elf:	
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	06/20/2023	
The date of each amendment( date this document was signed.	s) adoption:	, if other than the
*	06/20/2023	
	(no more than 90 days after amendment file	date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing require a Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sl	nareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the sufficient for approval.	e amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amen	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
·	(voting group)	
06/20/2	023	
Dated		
Signature	1000.	
sele	a director, president of other officer – if directors or officers ected, by an incorporator – if in the hands of a receiver, trusted ointed fiduciary by that fiduciary)	
	NILTON JIMENEZ	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	