

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	
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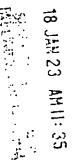
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R. WHITE
JAN 24 2018



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPOR	RATION: The Bookkeeper C	an Do, Inc.	<u> </u>
DOCUMENT NUME	P97000017086		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Molly Redman		
		Name of Contact Person	
	The Bookkeeper Can Do, Inc	<u>.</u> .	
		Firm/ Company	
	3861 NW 1 Drive		
		Address	
	Deerfield Beach, Florida 334	42	
		City/ State and Zip Code	
hookl	ceeperofbrwd@aol.com		
	•	sed for future annual report	notification)
	E-man address. (to be as	sed for future annual report	notificationy
For further information	n concerning this matter, pleas	se call:	
Molly Redman		at (480-9491
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
S35 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)
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



18 JAN 23 AM II: 35

		01	
The Bookkeeper Can Do, Inc.			Mit has been a series
(Name o	of Corporation as curre	ntly filed with the Floric	da Dept. of State)
P97000017086			
	(Document Number	of Corporation (if know	n)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corpor	cation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
Counting For Joy, Inc.			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	· "Co". A professional	'incorporated" or the abbreviation
n er e e e e e e e e e e e e e e e e e e	if annilashias	N/A	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
	,		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	
			
). If amending the registered agent an			the name of the
new registered agent and/or the ne		PSS:	
Name of New Registered Agent	N/A		
	(Florida	street address)	
New Registered Office Address:	N/A		. Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if continues the Agent's Registered Agent's Registered to the Registered Reg			ligations of the position.
manany madapi ma approminina ao tagan			
N/A	Signature of Nev		
4-1	Signature of Nev	v Revistered Avent, if cha	ınging

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.

Example: X Change	PT John D	<u>Ooe</u>	
X Remove	<u>V</u> <u>Mike J</u>	lones // //	
_X Add	SV Sally S	Smith / / /	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Adđ			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

The date of each amendment(s) ad date this document was signed.	option:, if other than the
Effective date if applicable:	
Checure date happineast.	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as t partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated	2018
Signature	Moly Redman
(By a d	irector, president or other officer – if directors or officers have not been
	d, by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)
	Molly Redman
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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