Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000227746 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone : (323) 962-8600

Fax Number

: (323) 962-3889

##Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN

NURTURING GREAT POTENTIAL INC

Certificate of Status	U
Certified Copy	1
Page Count	06
Estimated Charge	\$43.75

JUL 2 C 2020

I ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporations

NURTURING GRE	AT POTENTIAL INC			
N19000011838				
The enclosed Articles of Amendment and fee are subr	nitted for filing.			
Please return all correspondence concerning this matter	r to the following:			
Cheye	enne Moseley			
	(Name of Contact Perso	n)		
Legalz	oom.com, Inc.			
(Firm/ Company)				
101 N. Brar	nd Blvd., 11th Floor			
	(Address)			
Glenda	ale, CA 91203			
	(City/ State and Zip Cod	c)		
TNGP18@YAHOO.COM				
E-mail address: (to be used	for future annual report	notification)		
For further information concerning this matter, please	call:			
Cheyenne Moseley	800	773-0888 ext. 9724		
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made pay	yable to the Florida Depa	artment of State:		
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Confileate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Fiting Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Amend Divisio Clifton	Address ment Section of Corporations Building xecutive Center Circle		

Taliahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Articles of Amendment	
to	20 1.
Articles of Incorporation of	10. 1,
OI CONTRACTOR OF THE PROPERTY AND	X 49 - 1. J
NURTURING GREAT POTENTIAL INC	4年(なー)ケ
(Name of Corporation as currently filed with the Florida Dept. of State)	
N19000011838	<i>7</i> ,
(Document Number of Corporation (if known)	- 100 May 200
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the amendment(s) to its Articles of Incorporation:	: following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." "Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	- -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	- -
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent:	_
(Florida surcet address) New Registered Office Address:	
(Ciry) (Zip Code	e)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	

Page 1 of 4

To:

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 Doc 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.

<u>V</u> <u>Mike</u>	Jones	
Title	<u>Name</u>	. Address
D	Ana Fernandez	5230 Land O Lakes Blvd #928
		Land O Lakes, FL 34639
<u>D</u>	LuAnne LaCava	5230 Land O Lakes Blvd #928
		Land O Lakes, FL 34639
		
<u></u>		
		
	V Mike SV Sally Title	V Mike Jones SV Sally Smith Title Name D Ana Fernandez

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Promotion Co.)
(aimen additional sneets, i) necessary),	(ве хресіле)
	, <u>, , , , , , , , , , , , , , , , , , </u>
_	
· · · · · · · · · · · · · · · · · · ·	
······································	· · · · · · · · · · · · · · · · · · ·
	·
·	
· · · · · · · · · · · · · · · · · · ·	
<u></u>	
	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) ad date this document was signed.	option: 05/23/2020	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were aid was/were sufficient for approva	opted by the members and the number of votes east for the amendment(s)	
There are no members or memb adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
have not bee	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
Dionne Williams		
President	Typed or printed name of person signing)	
	(Title of person signing)	