

N20000010394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

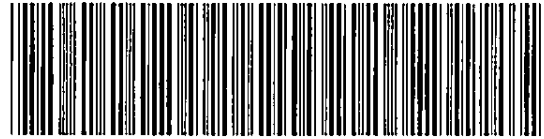
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Please push to Sunbiz  
They are filing their  
Annual Report as soon  
as the amendment is  
filed

Office Use Only



300431205153

06/19/24--01002--019 ++43.75

RECEIVED  
2024 JUN 19 PM 12:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*MM*

**COVER LETTER**

**TO:** Amendment Section -  
Division of Corporations

**NAME OF CORPORATION:** The Center for Cathartic Creations

**DOCUMENT NUMBER:** N20000010394

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kristine DiMartino

\_\_\_\_\_  
(Name of Contact Person)

The Center for Cathartic Creations

\_\_\_\_\_  
(Firm/ Company)

8291 SE Croft Circle M-8

\_\_\_\_\_  
(Address)

Hobe Sound, Florida 33455

\_\_\_\_\_  
(City/ State and Zip Code)

*Mischa@artlitproject.org* *Mischa@theartlitproject.org*

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mischa Bergeron

1-202-367-465

\_\_\_\_\_  
(Name of Contact Person)

at \_\_\_\_\_  
(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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

The Center For Cathartic Creations,INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N20000010394

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

The ARTlit Project, INC.

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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)*

8291 SE Croft Circle M-8 Hobe Sound Florida 33455

**C. Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

PO Box 542764 West Palm Beach , Florida 33454

**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:*

Michele Bergeron

8291 SE Croft Circle M-8

*(Florida street address)*

*New Registered Office Address:*

Hobe Sound

*(City)*

Florida 33455

*(Zip Code)*

**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.*

Michele Bergeron

*Signature of New 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 = 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>P</u>	<u>Kristine DiMartino</u>	<u>8291 SE Croft Circle Unit M-8</u> <u>Hobe Sound, Florida 33455</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>VP/S</u>	<u>Kristine DiMartino</u>	<u>8291 SE Croft Circle UNIT M-8</u> <u>Hobe Sound, Florida 33455</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Michele</u> <u>Mischa Bergeron</u>	<u>4506 Pine Park Drive</u> <u>West Lake Worth Florida 33467</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>P/T</u>	<u>Michele</u> <u>Mischa Bergeron</u>	<u>PO Box 542764</u> <u>West Palm Beach, Florida 33454</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

ARTHO Project is adding to the mission statement: the promotion of young female artist's talent using showcase opportunities, exhibitions, events, contests

---



---



---



---



---

- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated June 17, 2024

Signature *Kristine DiMartino*

(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)

Kristine DiMartino

(Typed or printed name of person signing)

Former president of the Center for Cathartic Creations, Inc.

(Title of person signing)