## P17000085231

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## **COVER LETTER**

TIVISION OF CORPCEATION

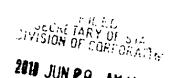
ZBIB JUN 20 AH II: Sa

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	FUNDH	HOME, ORG C	ORPORATION				
P17000085 231							
The enclosed Articles of Amena	<i>lment</i> and fee are su	bmitted for filing.					
Please return all correspondence	concerning this mat	tter to the following:					
(	CARLOS O	Name of Contact Perso	1				
<del></del>		Name of Contact Perso	n				
F	ONDMYHO	ME, ORG					
	· • • • • • • • • • • • • • • • • • • •	Firm/ Company					
	POBOX 9						
		Address					
	BOCA RAT	Address  TON, FL 33  City/ State and Zip Cod	497				
		City/ State and Zip Cod	e				
			POTON MAIL, COM				
E-m	ail address: (to be us	sed for future annual report	notification)				
For further information concerni	ing this matter, pleas	se call:					
CARLOS O. E	BURATTINI		305-9002				
Name of Contact	Person	at (561) 305 - 9002 Area Code & Daytime Telephone Number					
Enclosed is a check for the follo	wing amount made p	payable to the Florida Dep	artment of State:				
_	3.75 Filing Fee & entificate 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 Add	<del></del>	<del></del>	Address				
Amendment S Division of Co		Amendment Section					
P.O. Box 632	•	Division of Corporations Clitton Building					
Tallahassee, F	1, 32314	2661 Executive Center Circle					

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation



FUNDMYHOME, ORG CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State) P17000085231
(Document Number of Corporation (if known)

nt(s) to

its Articles of Incorporation:				
A. If amending name, enter the new name of the o	corporation:			
				The new
name must be distinguishable and contain the wa "Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	p, " "Inc, " or "Co"			
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AD</u>				
	_			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX</u> )		_	
			· · · · · · · · · · · · · · · · · · ·	
				<del></del> -
D. If amending the registered agent and/or registered new registered agent and/or the new registered		Florida, enter the i	name of the	
Name of New Registered Agent		<del></del>		
			<u> </u>	
	(Florida street addi	(255)		
New Registered Office Address:			Florida	
	(City)		(Zip Co	de)
New Registered Agent's Signature, if changing Re	gistered Agent:			
I hereby accept the appointment as registered agent.	I am familiar with and	l accept the obligat	ions of the position.	
Sig	nature of New Register	ed Agent, if changir	<u></u>	

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:

 $P = President; V \cap Vice President; T \cap Treasurer; S \cap Secretary; D \cap Director; TR \cap Trustee; C \cap Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer-director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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	PT Job	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>CFO</u>	CARLU B. BURATTINI	10456 BOW COURT
X Add			BOCA RATON FL 33448
Remove			
2) Change		<del></del>	
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>ade</i>	ng or adding a ditional sheets,			e specific)					
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<u>f an amer</u>	ndment provid	es for an	<u>exchange</u>	<u>e, reclassific</u>	ation, or c	ancellati	on of issued s	shares,	
provision	ns for impleme of applicable, in	<u>nting the</u> odicara Vo	<u>amendm</u>	<u>ent it not co</u>	ntained in	the ame	<u>ndment itself</u>	<u>::</u>	
(i) no	и прристис. т	ancare .v .	A 1						
CFO	CARLO	B	BUR	ATTINI	TO	BE	810/	OWNER	06
							31 /3	- 2 10/0/_/2	<i>U/</i>
FUN	UDMYHO	ME.	ORG	CORP	ORATI	UN			
				-					
								,,,,	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmen by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	lder
Dated_ JUNE 19, 2018	
Dated	
(By a director, president or other officer – if directors or officers have not become selected, by an incorporator – if in the hands of a receiver, trustee, or other exappointed fiduciary by that fiduciary)	
CARLOS O. BURATTINI	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	_

. . . . .