I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHNSON, LAUREN NICOLE

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: Electronic Signature of Registered Agent

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Officer/Director Detail :

Title	D	Title	D
Name	JOHNSON, LAUREN NICOLE	Name	JOHNSON, GEORGE
Address	160 COMMONWEALTH CT. N.	Address	14360 84TH TERRACE NORTH
City-State-Zip:	ST. PETERSBURG FL 33716	City-State-Zip:	SEMINOLE FL 33776
Title	D		
Name	LLOYD, EMILY		
Address	2674 FIRESTONE DRIVE		

FEI Number: 32-0574307

DOCUMENT# N18000004857

160 COMMONWEALTH CT. N. ST. PETERSBURG. FL 33716

Current Mailing Address: 160 COMMONWEALTH CT. N. ST. PETERSBURG. FL 33716 US

Current Principal Place of Business:

Name and Address of Current Registered Agent:

Entity Name: EMPOWERMENT FOUNDATION, INC.

JOHNSON, LAUREN NICOLE 160 COMMONWEALTH CT. N. ST. PETERSBURG, FL 33716 US

FILED Jan 26, 2023 Secretary of State 8013968630CC

Certificate of Status Desired: No

01/26/2023

Date

Date

PRESIDENT