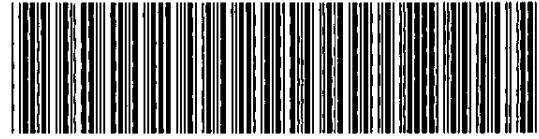


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09/06/12--01014--020 **52.50

(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:
Members Adopted Amendment.

Office Use Only

Effective Date 9-7-12

RECEIVED
12 SEP -6 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
12 SEP -6 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Amend.
9-6-12
DC*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DREAM BUILDERS GREATNESS CENTER, INC

DOCUMENT NUMBER: N01000004053

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

Please return all correspondence concerning this matter to the following:

JUDITH MANDRELL

(Name of Contact Person)

Dream Builders Greatness Center, INC

(Firm/ Company)

1911 Chowkeebin Nene COurt

(Address)

Tallahassee, FL 32301

(City/ State and Zip Code)

evangjudy00@hotmail.com

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

For further information concerning this matter, please call:

Judith Mandrell

(Name of Contact Person)

at (**850**) **212-8805**

(Area Code & Daytime Telephone Number)

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

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Dream Builders Greatness Center, INC.

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

N01000004053

(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:

Eff. 9-7-12

_____ *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:

611 Miccosukee Road

(Principal office address MUST BE A STREET ADDRESS)

Tallahassee, FL 32308

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 street address)

New Registered Office Address: _____

_____, Florida

(City)

(Zip Code)

FILED
12 SEP -6 PM 1:25
TALLAHASSEE FLORIDA

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

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>CFO</u>	<u>Danette McBride</u>	<u>1834 Wales Drive</u> <u>Tallahassee, FL 32303</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Priscilla Jean-Louis</u>	<u>5025 Hampton Ridge Ave.</u> <u>Tallahassee, FL 32311</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Dr. Marcella Torres</u>	<u>1834 Wales Drive</u> <u>Tallahassee, FL 32303</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Dr. Towanda Davila-Davis</u>	<u>2300 Monaco Drive</u> <u>Tallahassee, FL 32308</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Dr. Brandon Brantley</u>	<u>425 Ridge Haven Road</u> <u>Tallahassee, FL 32305</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Lawayne Salter</u>	<u>1305 Carson Dr.</u> <u>Tallahassee, FL 32305</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)

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<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 type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Antonio Witherspoon</u>	<u>810 Wadsworth St. Apt. 212</u> <u>Tallahassee, FL 32304</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Douglas Waddell, Sr</u>	<u>3762 Chaseridge Court</u> <u>Tallahassee, FL 32303</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Carolyn Waddell</u>	<u>3762 Chaseridge Court</u> <u>Tallahassee, FL 32303</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CEO</u> <u>P/CEO</u>	<u>Judith Mandrell</u>	<u>1911 Chowkeebin Court</u> <u>Tallahassee, FL 32301</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	_____	_____	_____

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)

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<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 type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Sharon Sheppard</u>	<u>8720 Salamanaca Ct</u> <u>Tallahassee, FL 32301</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Arthur Hairston</u>	<u>543 Hardaway Road</u> <u>Chattahoochee, FL 32324</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Jeff Carter</u>	<u>1812 Thomasville, RD</u> <u>Tallahassee, FL 32313</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Andrea Jackson</u>	<u>2712 W. Tharpe Street</u> <u>Tallahassee, FL 32302</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Dr. Edwardo Williams</u>	<u>3333 Captial Circle</u> <u>Tallahassee, FL 32312</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Robert Charles</u>	<u>1819 S. Gadsden St #C</u> <u>Tallahassee, FL 32301</u>

The date of each amendment(s) adoption: September 1, 2012

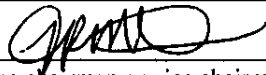
Effective date if applicable: September 7, 2012
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

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 September 6, 2012

Signature 
(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)

Judith Mandrell
(Typed or printed name of person signing)

President/CEO
(Title of person signing)