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(Requestor's Name)			
(Address)			
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(Cit	ty/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nam	e)	
(Do	ocument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

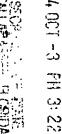
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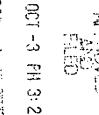


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HASSION OF COMPORATION





COVER LETTER

TO: Amendment Section

Division of Corporations

Sigma Lainhda Bamma, Inc NAME OF CORPORATION: DOCUMENT NUMBER: N03000003787 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tameisha Hinton
(Name of Contact Person) Sigma Lambdu Gamma, Inc.
(Firm/Company) 1102 Green Tree Ct. Apt;
(Address) FL 3830H (City/ State and Zip Code) tameisha - hinton@ yahoo. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$43.75 Filing Fee & \$\square\$\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ATTINICE ETPD

Articles of Amendment to Articles of Incorporation of

14 OCT -3 PM 3: 22

Famu - Sigma Leimida Clamma Inc. (Name of Corporation as currently filed with the Florida Dept. of State)	- 27XI 1800.81
	, ,
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the followamendment(s) to its Articles of Incorporation:	ving
A. If amending name, enter the new name of the corporation:	
The name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp" or "In "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: Tampisha Hinton 1102 Green Tree Ct. Apt i (Florida street address)	
New Registered Office Address:	
Tallahassee , Florida 38304 (City) (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. Signature of New Registered Agent, if changing	

Page 1 of 4

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 <math>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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	TS	Kamira Maharaje	400 Eugenia St. Apr 322 Tallahasse, FL 32310
2) Change Add Remove	<u> </u>	April Parkins	2833 S. Adams St Apt 2405 C Talkhassee, FL 38301
3) Change Add Remove	P	Tameisha Hinton	1102 Green Tree Ct. Apt. 1 Tallahassee, FL 32304
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

if amending or add attach additional she	zets, if necessary).	(Be specifi	c)				
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The date of each amendment(s) adoption:			
Effective date if applicable:			
	ıfter amendment file date)		
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the members and the was/were sufficient for approval.	number of votes cast for the amendment(s)		
There are no members or members entitled to vote on the ame adopted by the board of directors.	endment(s). The amendment(s) was/were		
Dated 10 3 14 Signature 10 3 14	·		
(By the chairman or vice chairman of the bo have not been selected, by an incorporator other court appointed fiduciary by that fidu	- if in the hands of a receiver, trustee, or		
Tamusha Hin- (Typed or printed name of per	to n son signing)		
(Title of person signing)			