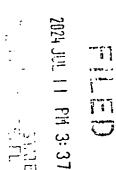
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	S.E.A.R. FOUNDA	ATION INC		
DOCUMENT NUMBER:	N03000006764			
The enclosed Articles of A		omitted for filing.		<u>.</u>
Please return all correspond	lence concerning this mat	ter to the following:		
Maria Sostre				
		(Name of Contact Perso	n)	-
Allegiance Advisors and T	ax Solutions Inc			
		(Firm/ Company)	<u> </u>	<u> </u>
900 SE Federal Hwy				
		(Address)		
Port ST Lucie, FL 34994				
		(City/ State and Zip Cod	le)	
maria@allegianceadvisor.n	et .			
]	i-mail address: (to be use	d for future annual report	notification))
For further information con	cerning this matter, please	e call:		
Maria Sostre	561-632-104;			
	(Name of Contact Person	n) at (A)		(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida Dep	artment of !	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing	Addrace			

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

S.E.A.R. FOUNDATION INC

FILED

(Name of Corporation as currently filed with the F	Florida Dept. of State)	2024 JUL 11	DH 0. 07
N03000006764	_	101.002.11	111 3: 37
(Docume)	nt Number of Corporation (if kn	own)	- PENE
Pursuant to the provisions of section 617,1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this Florida Not For	Profit Corporation	radopts the following
A. If amending name, enter the new name of the c	orporation:		
name must be distinguishable and contain the word "	cornaration" or "incornarated	" ar thu abhraviatio	The new
"Company" or "Co." may not be used in the name.	corporation in incorporated	or me any eviain	a Corp. or the.
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>	e: DRESS)		
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>		
	<u></u>		
D. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Florida, e office address:	enter the name of t	<u>he</u>
Name of New Registered Agent:			
New Registered Office Address:	(Flor	rida street address)	
_		, Floric	la
	(City)	, Floric (Zip	Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>dstered Agent:</u> I am familiar with and accept th	he obligations of the	position.
	Signature of New Register	ed Avent if changing	<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 = 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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>S</u>	Latonya Delaughter	5405 Steven Road Boynton Beach, FL 33472
 X Remove 2) Change Add 	<u>S</u>	Crystal Washington	3300 South Congress Ste 1 Boynton Beach, FL 33426
Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			
		cles, enter change(s) here: (Be specific)	

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The date of each amendment	t(s) adontion:	06/27/2024				16 ale al a
date this document was signed	l.			<u> </u>	.	, if other than the
Effective date if applicable:	07/01/2024					
парунсане.	(ne.	more than 9	0 days after ame	ndment file da	te)	
Note: If the date inserted in the document's effective date on the	nis block does n	ot meet the a	pplicable statute			vill not be listed as the
Adoption of Amendment(s)		HECK ON				
☐ The amendment(s) was/w						
☐ The amendment(s) was/w was/were sufficient for ap	rere adopted by oproval.	the members	and the number	r of votes east f	or the amendment(s)

.

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 Signature By the chairmal of 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)
Edam Ross
(Typed or printed name of person signing)
President (Infe of person signing)

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