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SECRETARY OF STAFE
TALL AHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	SIS CONFERENCE	E, INC		
	N04000004497			
DOCUMENT NUMBER: _				
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	nce concerning this matter	r to the following:		
JAN LEATHER				
	((Name of Contact Perso	n)	
		(Firm/ Company)	- 1	
50 STRATFORD RD				
		(Address)		
ENGLEWOOD FL 34223				
	(City/ State and Zip Coc	le)	
WOMENSIS@GMAIL.CO	м			
E	-mail address: (to be used	for future annual report	notification)	
For further information conc	erning this matter, please o	rall:		
JAN LEATHER	9414684537			
((Name of Contact Person)			Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	vable to the Florida Dep	artment of Stat	e:
□ \$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certified	e of Status Copy al Copy is
Mailing Address Amendment Section			Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SIS CONFERENCE INC

515 CONFERENCE INC			
(Name of Corporation as curre	ently filed with the Flo	orida Dept. of State)	
N04000004497			
(Document Nun	nber of Corporation (if	known)	
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ites, this Florida Not F	or Profit Corporation ad	opts the following
A. If amending name, enter the new name of the corpora	ation:		
N/a			The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporate	ed" or the abbreviation "	
B. Enter new principal office address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRES.)	Σ)		
	-		
			
C. Enter new mailing address, if applicable:	N/A		SEC SEC
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			<u> </u>
D. If amonding the registered agent and/or registered of	Cas addassa in Plants		<u> </u>
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		i, enter the name of the	
Name of New Registered Agent: N/A			A
		Florida street address)	
New Registered Office Address:			
		, Florida (Zip C	
	(City)	(Zip C	ode)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f		ot the obligations of the pe	osition,
	67		
	Mgnature of New Regi	stered 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: X Change X Remove X Add	<u>V</u> <u>M</u>	hn Doe ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Tela Thompson	155 CONGRESS AVE
XAdd			DAYTON BEACH
Remove			FLORIDA 32114
2) Change	D	SHEILA SERRARO	3202 40th ST
X Add			BRADENTON
Remove			FLORIDA 34205
3) X Change	T	JAN LEATHER	50 STRATFORD RD
Add			ENGLEWOOD
Remove			FLORIDA 34223
4) Change	Т	BOECKMAN, MARY	4512 MELBOURNE ST
Add			PORT CHARLOTTE
X Remove			FL 33980
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

utach additional sheets, if necessary).	(Be specific)	here:			
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The date of each amendment(s) add date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date artment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add was/were sufficient for approval.	pted by the members and the number of votes cast for the amendme	nt(s)
There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/wes.	re
Dated 7/1	0/18	
Signature	-/ M	
(By the chairn have not beer	nan or vice chairman of the board, president or other officer-if direct selected, by an incorporator – if in the hands of a receiver, trustee, pointed fiduciary by that fiduciary)	
JAN LEA	THER	
	(Typed or printed name of person signing)	_
TREASU	RER	
	(Title of person signing)	_