N05000007027

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None Charge & anend

03/07/13--01003--023 **43.75

13 HAR -6 PH 4: 31

13 HAR -6 PH 4: 46

BR 3/6/13

COVER LETTER

TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: SOFE SOCIETY INC.			
DOCUMENT NUMBER: NO 5000007027			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Rachel Johnson			
	(Name of Contact Person)	
	(Firm/ Company)		
P.O. BOX 101674			
	(Address)		
Ft. Lauderdale, Fl 33			
(City/ State and Zip Code)			
IGOT SOM THIN 2 SOUR UGHOO. (CM) E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please		,	
Rachel Johnson	at (954	, 349-5010	
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:			
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	☑\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amend Division	Address ment Section n of Corporations Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of



Safer society inc.	13 MAR - 6 PH 4: 46			
(Name of Corporation as currently filed with the FI	orida Dept. of State)			
Safer Society in C. NOSOOOOOOOOOOO				
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following			
	tion: 4 Him Right No. The new auton" or "incorporated" or the abbreviation "Corp." or "Inc."			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	3530 My 2nd street "Fort Lauderdall, Fl 33311			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 101674 Fort laurerdale, 71 33310			
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: Rachel	Johnson			
3530 NW 2nd st. Ft. Lauderdale, F1 33311 New Registered Office Address:				
Ft. Laud (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 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

wike Jones, vas Ker	nove, ana sany smnn,	, SV us un Aua.	
Example: X_Change X_Remove X_Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	Pres.	Shawneegua Elliot	4465 Treetruse Ln #13A Tamarac F1 33319
Remove			
2) Change	<u>500Ti</u> le95.	Shawneeglea Ellist	4465 Treehouse Ln # 13A Tamara(, F1 333)9
Remove 3) Change Add	Divector	Monique Schanburg	135 brown ave. Hempstead, N.Y 11550
Remove 4) Change Add	Brouch of Director	Tamika Mallard	11850 SW 264h St. Davie, Fl 33325
Remove S) Change Add	Board of Director	Jasmine Williams	2211 Lake Park Dr. SE #T Smyrm Ga 30080
Remove 6) Change Add	Board Of Director	Jalyssia Ixlilliams	H90 B Willow Bend Way Tallamssee, Fl 32304
Remove		Page 2 of 4	
7) <u>X</u> Ada	Board of Direct	tor Jakin Williams	3530 NW 2nd St

Jakia Williams

The date of each amendment(s) adoption: 3/5/13					
Effective date if applicable:					
	(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)				
☐ The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)				
There are no members or membadopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.				
Dated	3/6/13				
Signature On D	xea The Domo				
(By/the chail)	nan or vice chairman of the board, president or other officer-if directors				
	n selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)				
_ Jalys	SIA WILLIAMS (Typed or printed name of person signing)				
Board o	J Director				
	(Title of person signing)				