## NO\$00006216

(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:

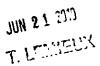
Office Use Only



800330355388

06/06/19--01003--007 \*\*35.00

20 JW -6 P 12 55



## **COVER LETTER**

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION	:the	Motivational	Elje	Fre
DOCUMENT NUMBER:	N0800	0006216		
The enclosed Articles of Amen	·			
Please return all correspondenc	a concerning this matter	r to the following:		
riease return an correspondence	—an	Welsol	- · · -	
	The	(Name of Contact Person  (Name of Contact Person  (Firm/ Company)	on)	
	2103 Com	(Address)	and Fa	
	Mia	mı FC (City/ State and Zip Co	33145	/
F-m	Λ	(City/ State and Zip Co	1	
For further information concern				261-9831
(N	ame of Contact Person)	( <i>A</i>	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following	owing amount made par	yable to the Florida Der	partment of S	tate:
		□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Certific Certific	Filing Fee cate of Status ed Copy ional Copy is
Mailing Add Amendment 1 Division of C P.O. Box 632 Tallahassee,	Section forporations 17	Amer Divis Clifto	t Address adment Section on of Corpoon Building Executive Co	rations

Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorporation

.1	of A
The A	notivational Edgl, Inc.
· · · · · · · · · · · · · · · · · · ·	urrently filed with the Florida Dept. of State
N 08 00000	Number of Corporation (if known) 255 JUH - 6 P 12: 59
· ·	ii. Vi
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:
	The new
name must be distinguishable and contain the word "co." "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDR</u>	RESS)
C. Enter new mailing address, if applicable:	۸.
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	)
D. If amending the registered agent and/or registere	d office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	
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:  X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name 4	<u>Addres</u> s
1) Change Add	<u>BM</u>	Merceles Seron	2103 Wal boy 2M Hoor Mrami Fc 33145
Remove 2) Change Add	<u>_BM</u>	Rich Bhangu	
Remove 3) Change Add	<u>BW</u>	Alexandra Kontos	
Remove  4) Change Add	<u>BM</u>	Yonathan Yehezkel	
Remove  5) Change  Add Remove	BW	Lynne Cameron	
6) Change Add Remove			

ttach additional sheets, if necessary).	(Be specific)
<u> </u>	
·	
<del></del>	
<del></del>	
<del></del>	
	<del></del>
<del></del>	
· · · · · · · · · · · · · · · · · · ·	
	<del> </del>
<del></del>	
-	
<del></del>	

	te this document was signed.	if other than the
Eff	fective date if applicable:  (no more than 90 days after amendment file date)	
Not	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be learnent's effective date on the Department of State's records.	isted as the
Ad	doption of Amendment(s) (CHECK ONE)	
Ø	The amendment(s) was/were adopted by the members and the number of votes east 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 6/2/19	
	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)	
	(Typed or printed name of person signing)	
	Founder and CEO (Title of person signing)	