N08000006216

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- TO: Amendment Section **Division of Corporations** The Motivational Edge, Inc. NAME OF CORPORATION: 1108000006216 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ian Welsch (Name of Contact Person) The Motivational Edge (Firm/ Company) 2103 Coral Way 2nd Floor (Address) Miami, FL 33145 (City/ State and Zip Code) ian@themotivationaledge.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ian Welsch 2699831 (Name of Contact Person) (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 & □\$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

Mailing Address

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

Enclosed)

Articles of Amendment Articles of Incorporation of

The Motivational Edge, Inc.		2022 UL 25 PH 3: 26
(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N080000	26216	•
	umber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not F	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
name must be distinguishable and contain the word "cor	poration" or "incorporate	The new
"Company" or "Co." may not be used in the name.		a come accommon corp. or me.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	ESS)	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	. <u> </u>	
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 off	ice address:	
Name of New Registered Agent:		
New Registered Office Address:	(I	lorida street address)
		, Florida
	(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.

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 Si	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change X Add	CRO	Jessenia Francisco	1550 NW 36th Street Miami, FL 33142
Remove			
2) Change Add			
3) Remove Change Add Remove			
4) Change Add		· - · · · · · · · · · · · · · · · · · ·	
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	

		
		
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-		
		
	pption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date wartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ade was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s	5)

		nbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.
adom		
	Dated	7/21/22
	Signatur	(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)
		lan Welsch
		(Typed or printed name of person signing)
		Founder and CEO
		(Title of person signing)