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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Shihan School of Su ON:	rvival			
DOCUMENT NUMBER:		·			
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all correspond	ence concerning this matt	er to the following:			
Walter Evans					
		(Name of Contact Po	erson)	:	
Shihan School of Survival					
		(Firm/ Company	7)	· · · · · · · · · · · · · · · · · · ·	
211 South Prospect Ave Su	ite 705				
		(Address)			
Clearwater, Florida 33756					
		(City/ State and Zip	Code)		
shihanwalter@yahoo.com					
	e-mail address: (to be use	d for future annual rep	ort notification	1)	
For further information con	cerning this matter, please	call:			
Walter Evans		at	727	641-0127	2023 JA SECRE
	(Name of Contact Persor	1)	(Area Code)	(Daytime Telep	hore Number
Enclosed is a check for the ☐ \$35 Filing Fee		•	& =\$52.50 Cenif s Cenif) Filing Fee icate of Status icd Copy ional Copy is	RY OF STATE

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

Articles of Amendment to Articles of Incorporation of

Shihan School of Survival							_
(Name of Corporation as currently filed with the	Florida D	ept. of S <u>tat</u> e	2)				
(Docume	ent Numbe	r of Согрога	tion (if known)		· <u>-</u> ·		-
Pursuant to the provisions of section 617,1006, Flori amendment(s) to its Articles of Incorporation:	ida Statute:	s, this <i>Floric</i>	la Not For Profit Co	rporation ac	lopts the I	ollowie	ıg
A. If amending name, enter the new name of the	corporati	on:					
N/A						The nev	4'
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	"corporati	ion" or "inc	orporated" or the ab	breviation '	Corp." o	r "Inc.`	•
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET AL				· -			_
. •							_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>30X</u>)						_
					-		_
D. If amending the registered agent and/or regis	tered offic	e address ij	Florida, enter the	name of the	:		
new registered agent and/or the new registere Name of New Registered Agent:	N/A	<u> </u>			(7) (1) (2)	2023	_
					百萬	<u>ن</u> چ	क्य म् इ
New Registered Office Address:			(Florida street c	(ddress)		24 A	
		(City)		, Florida (Zip (Code) (0) (0) 5	_ <u>=</u>	- {.
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	tegistered 1. lam far	<mark>Agent:</mark> niliar with a	nd accept the obliga	tions of the p	osition.	: 49	
_	Ni.	mature of \	ew Registered Agem	t 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 shoots if nocossary)

Please note the officer/director title by the first letter of the office title:

 $P = President; V' \cdot Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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 St	ines	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>S</u>	Brian Hooks	7001 Interbay Blvd #291 Tampa F1, 33616
Кепюче			
2) Change Add	<u>D</u>	Bethea Mahaleil Haroom Sha	2746 Via Tivoli #121B Clearwater, FL 33764
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
(attach additional shee		icles, enter change(s) here: (Be specific)	
<u>N/A</u>			

	 .		

•		
		
	•	
		
		
		,
		
The date of each amendment(s) adoption date this document was signed.	:	_, if other than the
Effective date if applicable:		
Energy Gate wappingsing.	no more than 90 days after amendment tile date:	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will not not of State's records.	be listed as the
adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted to was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

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)

Walter Evans

(Typed or printed name of person signing)

Director

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.