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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: Group M	lantege De	Delivrence	Family	Enpowernt	Inc.
DOCUMENT NUMBER:	N090000	00/292				
The enclosed Articles of Am	nendment and fee are sub	mitted for filing.				
Please return all corresponde	ence concerning this matte	er to the following:				
<i></i>	Adeline ((Name of Contact Po	erson)			
		(Firm/ Company	·)			
7814 S.W	2th place	(Address)				
North	Landerdule	FL. 35 (City/ State and Zip	20 68 Code)			
E	L Pierre Ps	or ve hoo	ort notification)		_	
For further information conc	erning this matter, please	call:				
Kenold Plev (Name of Co	ntact Person)	at (<u>S6)</u> (Are	a Code & Daytim	- 1228 e Telephone N	Number)	
Enclosed is a check for the fe	ollowing amount made pa	ayable to the Florida I	Department of Stat	te:		
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certificat s Certified	te of Status Copy nal Copy is		
Mailing A	ddress	Str	eet 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

	FIL:	
15	MAY -5	州版40
	1.7.22	

	to Articles of Incorporation	15 MAY -5 M ME 40	
	of	\$500 TOV	
Carrotte Assistance	De Delivence	Funily Explored	-+-
(Name of Corporation as currently filed w		- Comild Evily	1
M/O 9	000002392		
(Document Nu	umber of Corporation (if known)		
rsuant to the provisions of section 617.1006, Flor nendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not F</i>	or Profit Corporation adopts the following	
If amending name, enter the new name of the	e corporation:		
		The new	
me must be distinguishable and contain the word		ed" or the abbreviation "Corp." or "Inc."	
Company" or "Co." may not be used in the name	<u>e</u> .		
Enter new principal office address, if applica			
rincipal office address <u>MUST BE A STREET A</u>	<u>IDDRESS</u>)		
	<u></u>		
	 		
Enter new mailing address, if applicable:	BOW.		
(Mailing address MAY BE A POST OFFICE)	<u>BUX</u>)		
If amending the registered agent and/or regis	istavad office address in Florida	antay the name of the	
new registered agent and/or the new register		the name of the	
Name of New Registered Agent:			
rume of their registered rigem.	<u> </u>		
	(Florida street address)		
New Registered Office Address:	,		
		. Florida	
	(City)	(Zip Code)	
w Registered Agent's Signatura if changing t	Registered Agent		
nereby accept the appointment as registered agen		t the obligations of the position.	
ew Registered Agent's Signature, if changing F	Registered Agent:		

Page 1 of 4

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 A Add	PT John J V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	_0_	Sondre Pierre	N. Ladersky FL. 37068
2) Change Add			
Remove 3) Change Add Remove			·
4) Change Add Remove			
5) Change Add			
Remove 6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Article III Purpose: "The organization is organize
exclusively for charitable, religious, educational por scientifi
purposes under seition soil(c)(3) of the Internal
Bruence Code, or corresponding section of any future
federal tax code."
Dissolution: "Upon the elissolution of this orsenization,
assets shall be distributed for one or more exempt
purposes within the meening of souther 501 (2)
of the Tateral Revove Code, or corresponding
section of any Fiture Federal fex code, or stell
be distributed to the Federal government for to the
state or local government, for public purposes."

	date of each amendment(s) adoption: this document was signed.	, if other than the
Effe	(no more than 90 days after amendment file date)	
Ada	option of Amendment(s) (<u>CHECK ONE</u>)	
囡	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
口	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 April of 2015	
	Signature Colem (1)	
	(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)	
	President	
	(Title of person signing)	