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SECRETARY OF STATE

Amend

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JAN 1 3 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TRANSCER	ding Lives Inc	4
	0	
DOCUMENT NUMBER: NO 90000	7499	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Nodine Gora	lon	
(Name of	Contact Person)	
Transcending	lives Inc.	
(Film/	Company)	
•	- 1	
4781 N Classica	e Blud,	, 11 - A
(A	ddress)	
Delray Beach,	Fr. 33445	
(City/ State	e and Zip Code)	
E-mail address: (to be used	•	on)
For further information concerning this matter, please	Call.	
Nadine Gordon	at (305) 794-9	
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Department of	State:
\$35 Filing Fee \$2 \$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	Street Address	•
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center C	ircle

Tallahassee, FL 32301

Articles of Articles of

f Amendment to	Way Kr
Incorporation of	TATEOR MAIN
es Inc.	SEON.
led with the Florida	Dept. of State
• 6 9	RIO.

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

ldress in Florida, enter the name of th
<u>ess:</u>
street address)
(City), Florida_ (Zip Code)
nt: miliar with and accept the obligations
I

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Dir <u>ector</u>	Robert LEE II	3011 NW 171 St. CAROL CITY, FL. 33055	Add Remove
Director	JAZMine Woods	4781 N Classical B Delegy Beach, Fl. 33445	Add Remove
	ing or adding additional Articles, ente ditional sheets, if necessary). (Be spec		
NIA			
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<u></u>			
			· · · · · · · · · · · · · · · · · · ·
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The date of each amendment(s) adoption:
Effective date if applicable: ASAP (date of adoption is required)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast 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 108110 Signature 1 Caphible
(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)
Treorporator, Oirector, (President) (Title of person signing)