## N0900000 8811

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

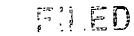
NAME OF CORPORATION	Pathway 2 Success I	nc.				
	99000008817					
DOCUMENT NUMBER:						
The enclosed Articles of Amen	dment and fee are sub	mitted for filing.				
Please return all correspondence	ee concerning this matte	er to the following:				
Christopher A. Jackson						
		(Name of Contact	Person)			
Pathway 2 Success Inc.						
		(Firm/ Compa	ıny)			
4604 49th Street North #30						
		(Address)				
Saint Petersburg , Florida 3370	)9					
		(City/ State and Zi	ip Code)			
christopher.jackson@pathway	2success.org					
E-n	nail address: (to be used	for future annual	report notifi	cation)		<del>-</del>
For further information concer-	ning this matter, please	call:				
Christopher A Jackson			72 <b>7</b> at	4	527247	
(N	ame of Contact Person		(Area Co	ode) (1	Daytime Telepl	ione Number)
Enclosed is a check for the foll	owing amount made pa	ayable to the Florid	la Departme	nt of Sta	ite:	
□ \$35 Filing Fee	1\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing For Certified Copy (Additional copy enclosed)	y is (	Certificat Certified	nal 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

## Articles of Amendment to Articles of Incorporation of



Pathway 2 Success Inc.		2021 HAR 15 PM 12: 49
(Name of Corporation as currently filed with the Flo	rida <u>Dept. of State</u> )	
N09000008817		SECRETARY OF STATE
(Document ?	Number of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida N</i>	ot 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 "con"Company" or "Co." may not be used in the name.	rporation" or "incorpo	orated" or the abbreviation "Corp," or "Inc."
·		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	
The party of the same of the s		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	·1	
(Studing address SIAT DE A FOST OF FICE BOX	·	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		origa, enter the name of the
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		(Florida street daaress)
		El caido
	(City)	, Florida (Zip Code)
	•	•
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I d		ccept the obligations of the position.
,,	y	, , , , , , , , , , , , , , , , , , , ,
	Signature of New I	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	PT         John Do           V         Mike Jo           SV         Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change × Add	<u>VP</u>	Emily Lockett	4604 49th Street North #1212 Saint Petersburg, Florida 33709
Remove			
2) Change Add	<u>VP</u>	Voncresha Jackson	4604 49th Sreet North #30 Saint Petersburg, Florida 33709
* Remove 3 ) Change Add * Remove	<u>D</u>	Justin L. Smith	2315 Beach Drive SE Saint Petersburg, Florida 33705
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	
Removing BD Members	and adding one. A	dding Emily Lockett as VP and Low Income	Representative.
			<del></del>

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-		
•	March 10th 2021	
The date of each amendment	(s) adoption: March 10th 2021	, if other than the
date this document was signed.		
Effective date if applicable:	March 10th, 2021	
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirement Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for th proval.	ne amendment(s)

Dated	March 1st 2021
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)
	Christopher A. Jackson  (Typed or printed name of person signing)