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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations Girl Power 2 Cure, Inc. NAME OF CORPORATION: N10000001127 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **ROGER BROOKS** (Name of Contact Person) GIRL POWER 2 CURE, INC. (Firm/ Company) 1881 S. 14TH STREET #1 (Address) AMELIA ISLAND, FL 32034 (City/ State and Zip Code) ADMIN@GP2C.ORG E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KELLY GOODFRIEND 904 4637041 (Name of Contact Person) (Daytime Telephone Number) (Area Code) 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 Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GIRL POWER 2 CURE, INC.		
(Name of Corporation N10000001127	as currently filed with the Florid	Dept, of State)
(Docum	ment Number of Corporation (if know	wn)
Pursuant to the provisions of section 617.1006, Floumendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not For F</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the	e corporation:	
		The new
name must be distinguishable and contain the worn "Company" or "Co," may not be used in the nam		or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicate the control of	ible: DDRESS	
		
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE	BOX)	
D. If amending the registered agent and/or reginew registered agent and/or the new register		ter the name of the
Name of New Registered Agent:	AMEI PRACHTHAUSER	
	1881 S. 14TH STREET #1	
New Registered Office Address:	·	la street address)
	AMELIA ISLAND	, Florida 32034
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: it. I am familiar with and accept the	obligations of the polition.
_	Imei Crook	hausen S
_	Signature of New Registere	ad Agent, if changing 2
		ם פ
	Page 1 of 4	

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 D Y Mike Jo SV Sally S	ones	
Type of Action (Check One)	Title	Name	Address
1) Change	P	INGRID HARDING	2891 BREAKERS COURT
Add			AMELIA ISLAND, FL 32034
X Remove			
2) X Change	BOARD	MONIQUE NOLK	1881 S. 14TH STREET #1
Add			AMELIA ISLAND, FL 32034
Remove			
3) Change	BOARD	KEVIN PIERCE	1881 S. 14TH STREET #1
X Add			AMELIA ISLAND, FL 32034
Remove			
4) X Change	<u>s</u>	JENN MILLER	1881 S. 14TH STREET #1
Add			AMELIA ISLAND, FL 32034
Remove			
5) Change	BOARD	AMEI PRACHTHAUSER	1881 S. 14TH STREET #1
X Add			AMELIA ISLAND, FL 32034
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)							
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	AUGUST 25, 2017	
The date of each amendment date this document was signed	(s) adoption:	, if other than the
Effective date if applicable:	AUGUST 25, 2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Signature (By the have rother of	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	-
_	(Typed or printed name of person signing)	
co	00	
	(Title of person signing)	