

N100000001446

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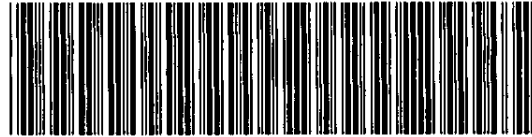
(Business Entity Name)

(Document Number)

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12 NOV - 7 PM 3:57

Amend/CC
10 11.9.12

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Mission Possible Foundation, Inc.

DOCUMENT NUMBER: N10000001446

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Linda Stauffer

(Name of Contact Person)

NRAI Corporate Services

(Firm/ Company)

1021 Main Street, Suite 1150

(Address)

Houston, Texas 77002

(City/ State and Zip Code)

mary@missionp.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda Stauffer, NRAI Corporate Services

at ()

800 862-5438

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|--|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Mission Possible Foundation, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N10000001446

(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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address:

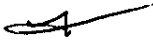
_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>TD</u>	<u>Sienna Gambino</u>	<u>1210 Southways Street</u>
<input type="checkbox"/> Add			<u>Delray Beach FL 33483</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>V</u>	<u>Marguerite E. "Becky" Patrick</u>	<u>1210 Southways Street</u>
<input checked="" type="checkbox"/> Add			<u>Delray Beach FL 33483</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>T</u>	<u>Andria Powell</u>	<u>1210 Southways Street</u>
<input checked="" type="checkbox"/> Add			<u>Delray Beach FL 33483</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>D</u>	<u>Elaine Lutz</u>	<u>1210 Southways Street</u>
<input checked="" type="checkbox"/> Add			<u>Delray Beach FL 33483</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Replace Article III - Purpose with the Following:

Article III - Purpose

Mission Possible Foundation Corporation will focus on improving living and health conditions of women, children, and the elderly globally. This also includes the prevention of mistreatment and abuse of women, children, and the elderly. The corporation is tasked with accomplishing the following objectives:

1) Improving the Health and Life of women, children and elderly by providing access to technologies that will:

a) provide Clean Water, b) improve agricultural production and quality, c) Provide health and hygiene solution

d) improve overall health and well being e) utilize whenever possible, alternative energy sources such

as solar, wind, waste and new energy alternatives , f) provide either prefabricated or in country construction of

residential and commercial facilities for such purposes as, housing, medical/ hospitals, schools, orphanages,

latrines and lavatories.

2) Access to life saving medicines by impoverished individuals, (through support of individuals or organizations

which are authorized to provide medical or professional services). The foregoing objectives will be accomplished

through a combination of grants to organizations with the same objectives. We provide global assistance to those

who are in greatest need.

The date of each amendment(s) adoption: November 1, 2012

Effective date if applicable: _____
(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 11/1/2012

Signature Mary Moran
(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)

Mary Moran

(Typed or printed name of person signing)

President

(Title of person signing)