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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Destiny Granted, Inc	. .				
DOCUMENT NUMBER:	N10000001458					
The enclosed Articles of An	nendment and fee are subr	nitted for filing.				
Please return all correspond	ence concerning this matte	er to the following:				
Tomeka Walker						
		(Name of Contact	Person)			
		(Firm/ Compa	ny)			
1206 N 29th Street #2						
		(Address)				
Fort Pierce, FL 34947						
		(City/ State and Zi	p Code)			
tomekawałker29@yahoo.cc	om					
Ţ.	-mail address; (to be used	for future annual re	eport ne	tification)	
for further information conc	erning this matter, please	call:				
Tomcka Walker		i	772 11		353-9326	
	(Name of Contact Person)		(Are	i Code)	(Daytime Telephone Number)
inclosed is a check for the f	ollowing amount made pay	vable to the Florida	Depart	ment of S	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		<u>s</u>	treet A	ddress		

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 to Articles of Incorporation of

Destiny Granted, Inc.					
(Name of Corporation :	s currently filed with the Florida De	ept. of State)			
N10000001458					
(Docume	ent Number of Corporation (if known)				
Pursuant to the provisions of section 617,1006, Flori- amendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Prof	it Corporation adopts the following			
A. If amending name, enter the new name of the	corporation:				
DESTINY ACCESS GRAV	VIED. INC.	The new			
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" or to	he abbreviation "Corp." or "Inc."			
B. Enter new principal office address, if applicab	le: 1221 N 13th Street	1221 N 13th Street			
(Principal office address <u>MUST BE A STREET AD</u>	DRESS) Fort Pierce, FL 34946				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE Ba</u>	<u>OX</u> 1				
D. If amending the registered agent and/or registe	ered office address in Florida, enter	the name of the			
new registered agent and/or the new registered	l office address:				
Name of New Registered Agent:	N/A				
_					
New Registered Office Address:	(Florida sti	vet aldress)			
}	i/Λ	, Florida			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing Re	gistered Agent:				
hereby accept the appointment as registered agent.	I am familiar with and accept the ob-	ligations of the position.			
	Signature of New Registered A	gent, if changing , 🛌			
		gent. if changing a See Jul 1			
	Page 1 of 4	ASSE TARY			

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		John Doe				
X Remove	<u>V</u> <u>Mi</u>	Mike Jones				
\underline{X} Add	<u>SV</u> <u>Sal</u>	lly Smith				
Type of Action	<u>Title</u>	Name	<u>Addres</u> s			
(Check One)						
1) X Change	PVS	Tomeka Walker	1206 N 29th Street #2			
1) Change						
Add			Fort Pierce, FL 34947			
Remove						
2)Change	D VP	Evelyn Spurlock				
Add						
Y						
Remove						
3) Change	D S	Shaquita D Brown				
Add						
v						
Remove						
4) Change	Т	Tameshia Graham				
Add						
X Remove						
	r.					
5) Change	Т 	EaCrise Moody	PO Box 843			
X Add			Fort Pierce, FL 34954			
Remove						
Kenkive						
6)Change						
-						
Add						
Remove						

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

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

Adding the following to Article III: Our mission includes reconnecting families, providing services to runaways and troubled
youth. Said corporation is organized exclusively for charitable, religious, and educational purposes. Including the
distributions to other exempt 501 c 3 organizations. No part of the net earnings of the corporation shall inure to the benefit of,
any persons, except to pay reasonable compensations for services. No substantial part of the activities of the corporation shall
be he carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in
any political campaign on behalf of or in opposition to any candidate for public office.
Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of
section 501(e)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be
distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed
of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is
then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are
organized and operated exclusively for such purposes.
Conflict of Interest Statement: If any item presented for discussion or vote appears to present a conflict of interest, then the
conflicted parties will excuse themselves from the discussion or vote to avoid any controversy or conflict.

	date of each amendment(s) ado this document was signed.	ption:	, if other than the
Effe	July 1 setive date if applicable:	2, 2018	·-
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this block ument's effective date on the Department.	does not meet the applicable statutory filing requirements, this date will not artment of State's records.	be listed as the
Ado	ption of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes east for the amendment(s)	
	There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were is.	
	O7/12/2018	- 	
	Signature LHILL	a lake	
	(have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	Tomeka W	'alker	
		(Typed or printed name of person signing)	
	President		
	<u> </u>	(Title of person signing)	