# N10000007108

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
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### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE HEART OF POSSIBILITIES
DOCUMENT NUMBER: N 1 0000057/08
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alex Scott Cunningham (Name of Contact Person)
THE HEART OF POSSIBILITIES (Firm/Company)
2053 LINCOLN C
(Address)
BOCA RATON, FZ 33434 (City/ State and Zip Code)
(City/ State and Zip Code)
Cunninghams of a rocket nail. com  Estail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
A/ex Scott Cunningham at 361 523-1789 (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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 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

Articles	of Incorporation	
bleard of Poss	ibilities, Inc	
(Name of Corporation as current		
(Document Number	er of Corporation (if known)	
ursuant to the provisions of section 617.1006, Florida Statutes	s this Florida Not For Profit Cor	magation adopts the following
nendment(s) to its Articles of Incorporation:	s, and 1 to the 1 or 1 roja Cor,	por anion accepts the following
If amending name, enter the new name of the corporation	D. T. C.	and the second s
if amending name, enter the new name of the corporation	<del>ли.</del> /	
		The new
name must be distinguishable and contain the word "corporate" "Company" or "Co." may not be used in the name.	ion" or "incorporaled" or the abi	breviation "Corp." or "Inc."
	/	当時日
<ol> <li>Enter new principal office address, if applicable:</li> <li>Principal office address <u>MUST BE A STREET ADDRESS</u>)</li> </ol>		- <del>5-1. ω</del>
rincipa office aumess <u>MOSI BE A STREET ADDRESS</u> )		
	/	三 三 三 1
	<del>/</del>	
Enter new mailing address, if applicable:		Pilate man II. Pilate man II. Pilate man II. Pilate man II.
(Mailing address MAY BE A POST OFFICE BOX)		-
	/	
	<i></i>	
). If amending the registered agent and/or registered offic		ame of the
new registered agent and/or the new registered office ac	<u>idress:</u>	
Name of New Registered Agent:		
· · · · · · · · · · · · · · · · · · ·	(Florida street ad	dress)
<u>New Registered Office Address:</u>		
/ <u></u>		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligati	ons of the position.
/		
/ Si <sub>l</sub>	gnature of New Registered Agent,	if changing
/		
/		

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 V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D	Christine O'Neil	9262 Ketay Dr Boca Raton
Remove			FL. 33428
2) Change	$\overline{D}$	Bethy J. Ortiz	18324 104 Ferr So
Add Parasas		•	Bock Katon EL. 33498
Remove 3) Change	<u>C</u>	ALex Scott Cunningham	2055 Lincolna
Add		J	BOLARATON FL 33434
Remove			- FF 33437
4) Change Add	<del></del>		<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional and additional and additional sheets, if necessar	y). (Be specific)				
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date this document was signed.	an un
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	1e
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 10/25/16  Signature 10/25/16	
(By the chairman or vice chairman of the board, president of 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)	
Alex Soft Cunning ham (Typed or printed name of person signing)	
Chair man (Title of person signing)	