## N10000001108

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SION OF CORPORATION
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporations		
NAME OF CORPORATION: Relevant Arts	Instruction Focu	sed on Self Esteem, Inc.
DOCUMENT NUMBER: N1000009	768	
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Melinda Scaffe		
	(Name of Contact Person	n)
Relevant Arts Instruction	Focused on	Self Esteem, Inc.
	(Firm/ Company)	
606 Lightsey Lane		
	(Address)	
Lutz, FL 33548		
	(City/ State and Zip Code	2)
mtscaffe@hotmai		
E-mail address: (to be used	•	notification)
For further information concerning this matter, please		
Melinda Scaffe	<sub>at (</sub> 813	494-2525 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
□ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Relevant Arts Instruction Focused or	n Self Esteem, Inc.
(Name of Corporation as currently filed with the Flo	
N10000009768	
(Document Number of Corpor	ation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
a. If amending name, enter the new name of the corporat	ion:
Not Applicable	The new
name must be distinguishable and contain the word "corpora (Company" or "Co." may not be used in the name	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	Not Applicable
C. Enter new mailing address, if applicable:	Not Applicable
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
If amending the registered agent and/or registered office a new registered agent and/or the new registered office a new registered agent and/or the new registered office a new registered agent and/or the new registered office a new registered agent and/or the new registered office a new registered agent and/or the new registered office a new registered agent and/or registered office and new registered agent and/or registered office and new registered agent and/or registered office and new registered agent and/or the new registered office agent and/or registered office agent and/or registered agent and/or the new registered office agent and/or the new registered agent agent agent agent agent agent a	ddress:
Not Applica Name of New Registered Agent:	adie
New Registered Office Address:	(Florida street address)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	

Page 1 of 4

Signature of New 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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change Add Remove	D		Savannah Scaffe	606 Lightsey Ln Lutz, FL 33548
2) Change Add Remove			1-	
3 ) Change Add Remove		_		
4) Change Add Remove		-		
5) Change Add Remove		_	1	
6) Change Add Remove		_		

E.	If amending or adding additional Art	icles, enter change(s) here:
	(attach additional sheets, if necessary).	(Be specific)

## Add the following two Articles:

Relevant Arts Instruction Focused on Self Esteem, Inc. is organized for charitable,
religious, educational, and scientific purposes, including, for such purposes, the making
of distributions to organizations that qualify as exempt organizations under section 501(c)(3)
of the Internal Revenue Code, or corresponding section of any future federal tax code.
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes
within the meaning of sections 501(c)(3) of the Internal Revenue Code, or 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 disposed of shall be disposed of by a
Court of Competent Jurisdiction of the county in which the principal office of the organization or
organizations, as said Court shall determine which are organized and operated exclusively for
such purposes.

The date of each amendment(s) adoption: <b>b</b> /1/2012				
	ective date if applicable:			
	(no more than 90 days after amendment file date)			
Ado	option 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 6/1/2012			
	Signature Melinda JScaffe			
	(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)			
	Melinda T. Scaffe			
	(Typed or printed name of person signing)			
	Secretary			
	(Title of person signing)			