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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: PROTECT OU	IR YOUTH FOL	JNDATION	N INC	
DOCUMENT NU	мвек: <u>N11000004878</u>			····	
The enclosed <i>Artic</i>	les of Amendment and fee are sub	mitted for filing.			
Please return all co	rrespondence concerning this mat	er to the following:			
	MARIA	AH WILSON			
	(Name of	Contact Person)			
		N/A			
	(Firm/ Company)				
	6430 N	E 18TH AVE			
	(1	Address)			
	FORT LAUDI	ERDALE FL 33334	4		
***************************************	(City/ Stat	e and Zip Code)			
	POYFOUNDA E-mail address: (to be used	FION@GMAIL.CC	ort notificatio	n)	
For further informa	tion concerning this matter, please	call:			
WILSON, MAR	AH D	at (305)	796-9552		
(Nar	ne of Contact Person)		le & Daytime	Telephone Number)	
Enclosed is a check	for the following amount made p	ayable to the Florida I	Department of	State:	
₹ 35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing F Certified Copy (Additional copy enclosed)	is	□ \$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		Clifton Bu 2661 Exec	nt Section f Corporations	rcle	

Articles of Amendment to **Articles of Incorporation** of

PROTECT OUR YOUTH FOUNDATION INC.

N11000004878

to Articles of Incorpo of PROTECT OUR YOUTH FOUL (Name of Corporation as currently filed with	NDATION INC.				
	the Florida Dept. of State)				
M1100004878 (Document Number of Corporation (if known)					
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts				
A. If amending name, enter the new name of the corporatio	n:				
N/A					
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." <u>"Company" or "Co." may no</u>					
B. Enter new principal office address, if applicable:	6430 NE 18TH AVE				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	FORT LAUDERDALE				
	FL 33334				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6430 NE 18TH AVE				
	FORT LAUDERDALE				
	FL 33334				
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade					
Name of New Registered Agent: MAR	RIAH WILSON				
	NE 18TH AVE ida street address)				
FORT	LAUDERDALE , Florida 33334 (City) (Zip Code)				
position. Maria	gent: familiar with and accept the obligations of the Registered Agent, if changing				

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action		
<u>P</u>	MARIAH WILSON	6430 NE 18TH AVE FORT LAUDERDALE FL 33334	☑ Add □ Remove		
<u>VP</u>	DENTONE BLACK	6430 NE 18TH AVE FORT LAUDERDALE FL 33334	☑ Add ☐ Remove		
<u>SEC</u>	SHAWNTELL MARTIN-PH	6430 NE 18TH AVE FORT LAUDERDALE FL 33334	☑ Add ☐ Remove		
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
		•			
		,			

The date of each amendment(s) add	option: MONA 9, 2011
TORR AS DA PR 12 11	(date of ddoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adop was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)
There are no members or membe adopted by the board of directors.	rs entitled to vote on the amendment(s). The amendment(s) was/were
have not b	airman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
	MARIAH WILSON (Typed or printed name of person signing) Oreside —
	(Title of person signing)

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