N110000005381

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Knowledge Speaks MC. DOCUMENT NUMBER: N110000 5381
DOCUMENT NUMBER: 110000 5381
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jena Ferguson Name of Contact Person
Knowledge Spenks, MC'
OPa locka Fl 33054 City/ State and Zip Code
Address
OPA locka F1 33059
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tena Fer Susur at (305) 681 0903 Name of Contact Person Area Code & Daytime Telephone Number
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:
\$\text{\$\subseteq}\$\$\$\$43.75 Filing Fee & Certificate of Status (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 Incor of	poration		
Knowletge	- SPEAKS,	IC.	. <u>.</u>	
	currently filed with the Flor	ida Dept. of State)		
	Number of Corporation (if k	naum)		
·	. ,	•		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>Fl</i> e	orida Profit Corporation a	dopts the following	g amendment(s) to
A. If amending name, enter the new nan	ne of the corporation:			
name must be distinguishable and conta "Corp" "Inc.," or Co.," or the designation word "chartered," "professional association	tion "Corp," "Inc," or "Co	". A professional corpor		
B. Enter new principal office address, if (Principal office address <u>MUST BE A STI</u>		· 		mari
C. Enter new mailing address, if application (Mailing address MAY BE A POST Of				AS SEB - 1 IM 10: 8
D. If amending the registered agent and new registered agent and/or the new		s in Florida, enter the nat	ne of the	ை
Name of New Registered Agent			-	
	(Florida street	address)	-	
New Registered Office Address:	(City)	, Florida	(Zip Code)	•
	(0.19)		(Eip Conc)	
New Registered Agent's Signature, if chall hereby accept the appointment as register		h and accept the obligation	is of the position.	

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> <u>John I</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	lones	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>S</u>	Chris Ferguson	2861 NV 135234
Add		Chris Ferguson Secretary	OPa locku Fl 33054
Remove		,	
2) Change	T	Fred Smith Trensurer	1700 SW 22 ave
Add		Treasurer	Miami F1 33031
Remove	PT No	Tama Factor	286 N. 1254
3) Change	PT.4 SECRT.	Jena Ferguson	<u>0 Pa louka F133057</u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		•	

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		g or adding add tional sheets, if t	necessary).	(Be specific)				
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(15)(117)
The date of each amendment(s) adoption:
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 shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 8 24 2
Signature
(By a director, president or other office - if directors or officers have not been
selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President
(Title of person signing)