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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON:	Education & Empow	erment, Inc.	
DOCUMENT NUMBER:		N11000011896	;	
			,	
The enclosed Articles of Art	nenameni and tee are sub	mitted for filing.		
Please return all correspond	ence concerning this matt	er to the following:		
		Kimberlee A. Moo	ere	
		(Name of Contact Pe	rson)	
	E	ducation & Empowerr	nent, Inc.	
		(Firm/ Company	·)	
		P. O. Box 685		
	_	(Address)		
	V	Vaverly, Florida 3387	7-0685	
		(City/ State and Zip (Code)	
		kimberlee612@gma	il.com	
	-mail address: (to be used	l for future annual rep	ort notification	n)
For further information con	cerning this matter, please	e call:		
	Kimberlee A. Moore	at	863	709-4848
· · · · · · · · · · · · · · · · · · ·	(Name of Contact Persor		(Area Code)	(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 Fee of Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
34.97	Carrier .	6.		

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of Education & Empowerment, Inc

Educatio	on & Empowerment, Inc.	
Name of Corporation as currently filed with the Florida D	ept. of State)	
N	11000011896	
(Document Number	er of Corporation (if know	m)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For P</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
	N/A	The new
name must be distinguishable and contain the word "corporate" "Company" or "Co," may not be used in the name.	ion" or "incorporated" o	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	2019 DEC -2 SECRETARY ALL ATTASSE
D. If amending the registered agent and/or registered officency registered agent and/or the new registered office ac		ter the name of the
Name of New Registered Agent:	N/A	
New Registered Office Address:	(Florid	a street address)
	N/A	Florida
· 	(City)	Florida
New Registered Agent's Signature, if changing Registered . I hereby accept the appointment as registered agent. I am fan		obligations of the position.
- C:	NA NA	d Agent, it changing
Sig	NA (Y.Y.) gnature of New Registered	d 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 X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>TD</u>	Amanda Land	P.O. Box 685 Waverly, FL 33887-0685
xx Remove			P.O. Box 685, Waverly, FL 33877
2) Change Add	TD	J. R. Harris	P.O. Box 685 Waverly, FL 33877
Remove Change Add Remove			
4) Change Add	_		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove		Page 2 of 4	
E. If amending or add (attach additional sh		rticles, enter change(s) here:	
None			

None		
		
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	Page 3 of 4	
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The date of each amendment(s) ad	loption:November 22, 2019	, if other than the
date this document was signed.	22 2000	
Effective date if applicable:	November 22, 2019 (no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s)	

Dated	November 22, 2019
Signatui	e Kinhile D'Moore
	(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)
	Kimberlee A. Moore
	(Typed or printed name of person signing)
	President, Board of Directors
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.