

N12-00000012

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMEND
ERC
5/14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: **DIVINE DESTINY MENTORING INC**

DOCUMENT NUMBER: **N12000000012**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TRINETTA YOUNG

(Name of Contact Person)

(Firm/ Company)

P. O. BOX 490291

(Address)

LEESBURG, FL 34749

(City/ State and Zip Code)

divinedestinymp@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Trinetta Young

(Name of Contact Person)

at **305 505-3031**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) | <input type="checkbox"/> \$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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED

12 APR 30 AM 11:11

DEPARTMENT OF STATE

Articles of Amendment
to
Articles of Incorporation
of

DIVINE DESTINY MENTORING INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N12000000012

(Document Number of Corporation (if known))

FILED
12 APR 30 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P. O. BOX 490291

LEESBURG, FL 34749

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☐ Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|--|-----------|-----------------------|---|
| 1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>C</u> | <u>TRINETTA YOUNG</u> | <u>TRINETTA YOUNG</u> <u>1123 LINMAR AVENUE</u> <u>FRUITLAND PARK, FL 34731</u> |
| 2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>VP</u> | <u>SOPHIA WILSON</u> | <u>735 SOUTH US HWY 441, APT. #151</u> <u>LADYLAKE, FL 32159</u> |
| 3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>P</u> | <u>JUDY YOUNG</u> | <u>1123 LINMAR AVENUE</u> <u>FRUITLAND PARK, FL 34731</u> |
| 4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>S</u> | <u>ASHLEY LESTER</u> | <u>735 SOUTH US HWY 441, APT #151</u> |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>D</u> | <u>DUDLEY NANCY</u> | <u>P. O. BOX 942</u> <u>TAVARES, FL 32778</u> |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>D</u> | <u>LILLIE A BROWN</u> | <u>420 FERN AVENUE</u> <u>TAVARES, FL 32778</u> |

N/A

MAY/10/2012/THU 10:42 AM goldkey
05/09/2012 10:43 3526024461

FAX No. 256 830 0945
QUALITY AND BUSINESS

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PAGE 06/06

The date of each amendment(s) adoption: 03/31/2012
Effective date if applicable: 04/30/2012
(no more than 90 days after amendment file date)

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

5/10/12

Signature

Trinetta Young

(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)

TRINETTA YOUNG

(Typed or printed name of person signing)

CHEIF EXECUTIVE OFFICER

(Title of person signing)