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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Girls' Em	npowerme	nt Ministries & Services Inc.
DOCUMENT NUMBER: N120000)/1/3	
The enclosed Articles of Amendment and fee are submi	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Vershawn P	Perry - Ha Name of Contact Person	gins
Girls' Empowerment		Services Inc.
P.O. BOX 10	62321 (Address)	
Miami, Fl)
Vershawngems E-mail address: do be used f	or future annual report n	otification)
For further information concerning this matter, please ca	all:	
Vershawn Berry-Hag (Name of Contact Person)		
Enclosed is a check for the following amount made pays	able to the Florida Depa	rtment of State:
\$35 Filing Fee \$\Bigcup \text{\$43.75 Filing Fee & Certificate of Status}\$	3\$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	Division	Address ment Section to of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

	Articles	s of Amendment to		FILE	ED .
	Articles	of Incorporation of	• ,•	القمي	PM 12: 55
Giolo' France L	111		0- 3	DIS NAK 1.	
Girls Empowerment (Name of Corporation as currently filed w		1377185 5	Servi	CESTERKE	FIFLORIDA
	_	ida Dept. of State)		TALLAHAS)
NIZOOOO (Document Number		tion (if Itmourn)	est was		· ·
	•	, ,			
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida Not Fo</i>	r Profit Corp	oration adopts	the following
A. If amending name, enter the new name of the	corporatio	on:			
		· · · · · · · · · · · · · · · · · · ·			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorporated	l" or the abbi	eviation "Corp	." or "Inc."
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A	<u>ble:</u>	,	-		
(Frincipal office address MOST BE A STREET AL	<u>vukess</u>)		···		
	-				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	ROX)				
(g	<u></u>				
	-	· · · · · · · · · · · · · · · · · · ·			
D. If amending the registered agent and/or regis new registered agent and/or the new registered			enter the na	me of the	
Name of New Registered Agent:				_	
				_	
 		Florida street address)		-	
New Registered Office Address:					
			, Florida		
	(City)		(Zip (Code)	
New Registered Agent's Signature, if changing R	egistered A	Agent:			
I hereby accept the appointment as registered agent	. I am fam	iliar with and accept	the obligation	ns of the positio	n.
				_	
Signature of 1	New Registe	red Agent, if changin	g		

Page 1 of 4

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: XChange	PT Jo	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
_X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change Add Remove	_C	Monica Evans	P.O. Box 162321 Miomi, FL 33116
2) Change Add Remove	CFO	Whitney English	P.O. BOX 16232 Miami, Fl 33116
3) Change Add Remove	C00	Dandria Gray	P.O. BOX 162321 Miami, FL 33116
4) Change Add Remove	<u>CFO</u>	Rosalyn Berry	P.D. BDV 16232 Miami, Fl. 33116
5) Change Add Remove			
6) Change Add Remove			

If amending or a	adding additional I sheets, if necessa	Articles, enter	change(s) here:		
anach aaamonai	sneets, if necessal	ry). (Be speci	țic)		
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The date of each amendment(s) adoption: March 9, 2012
Effective date if applicable: March 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 3/30/2012
Signature Ramali Dilly
(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)
(Typed or printed name of person signing)
(Title of person signing)