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2017 AUG -3 PH 2: 36
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C. GOLDEN AUG - 9 2017

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION	Youth Empowermen	Movement, Inc.	
	N12000007186		
DOCUMENT NUMBER:			
The enclosed Articles of An	nendment and fee are subm	nitted for filing.	
Please return all corresponde	ence concerning this matte	r to the following:	
Scott A. Mager			
		(Name of Contact Perso	n)
Mager Paruas, LLC			
	-	(Firm/ Company)	
2719 Hollywood Blvd.			
		(Address)	
Hollywood, FL 33020			
		(City/ State and Zip Cod	e)
Scott@magerparuas.com			
E	-mail address: (to be used	for future annual report	notification)
For further information conc	erning this matter, please o	call:	
Scott A. Mager	954-763-280C at		
	(Name of Contact Person)	(A)	rea Code) (Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida Depart	artment of State:
■ \$35 Filing Fee	□S43.75 Filing Fee & I Certificate of Status	□\$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 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 of

FILEU

Youth Empowerment Movement, Inc.	2017 AUG -3 PM 2: 36
(Name of Corporation as currently filed with	the Florida Dept. of State)
N12000007186	TALÉAHASSEE, FLORID
(Document Number of Corpora	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida</i> amendment(s) to its Articles of Incorporation:	a Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "inco "Company" or "Co." may not be used in the name.	orporated or the appreviation Corp. or the.
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)	
The state of the s	
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
(Ciţy)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with an	ed accept the obligations of the position.
Signature of Ne	w 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	Beth Gilbert	8218 Adrina Shores Way
Add			Boynton Beach, FL 33473
X Remove			
2) Change			
Add			
Remove			
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		-	
Remove			

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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be locument's effective date on the Department of State's records.	listed as the
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 7/28/2017	
Signature	
(By the chairman or vice chaffman 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)	
Scott A. Mager	
(Typed or printed name of person signing)	
President	

(Title of person signing)