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## COVER LETTER

COVERTEITER				
TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: I'm 4 Change INC				
DOCUMENT NUMBER: N13 800 00 3232				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:  Chury Denson  (Name of Contact Person)				
(Name of Contact Person)  In Change Inc  (Fin Company)				
1050 Energy Street				
Vacksonille Florida 32207				
(City/ State and Zip Code)				
In 4 Charge Inc @ 9 mail. Com E-mar address: (to be used for value annual report notification)				
For further information concerning this matter, please call:				
Garry Denson at 904 917 6855				
(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:				
S35 Filing Fee S43.75 Filing Fee S43.75 Filing Fee S52.50 Filing Fee Certificate of Status (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status (Additional copy is Enclosed)				

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment to

Articles of Incorporation	
Im U Chanze Fre	
(Name of Corporation as currently filed with the Florida Dept. of State)	
W13 000 80 3232 (Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:  L'MU Change Community Development CORP, 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)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the	כת
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: X/Change X/Remove X/Add	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)hange	NP	Wayne Greenfield	966 Corsica lane
Remove  2) Change Add	VP	Robert Barratt	Jacksonvlle FL 32218 966 Corsica Lane
	<del>-</del>		Vacksmille Florde 32218
4) _ Change _ Add	5	Beverly Blake	964 Corsicalans
Remove  5) Change Add	5	Kimberly Deuson	Tadsonulle Florda 32218 The Lorsian lane
Remove 6) Change	•		Vaclson.lle Fronde 32218
Add Remove			
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	

<u></u>	
- "	
The date of each amendment(s) adoptidate this document was signed.	on:, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	bes not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)
•	ed by the members and the number of votes east for the amendment(s)

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

Signature

(B) 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)

Drec: Out