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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations PETALS WITH PURPOSE, INC 13000003451 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BRITTANY AGRO

PETALS WITH PURPOSE, INC

10190 CLUBHOUSE TURN RD.

LAKE WORTH FL 33449
(City/ State and Zip Code)

into @ petalswith purpose. org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVE HALBROOK at (718) 974-4708 (Area Code & Daytime Telephone Number)

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

■\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status

enclosed)

Certified Copy (Additional copy is □\$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

PETALS WITH PURPOSE, INC

PELAUS WITH	I PURPOSE, LINC.
(Name of Corporation as currently filed with the Flo	
N1300000	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	<u>tion:</u>
N/A	<u>The ne</u>
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	ice address in Florida, enter the name of the address:
Name of New Registered Agent: NA	(SAME)
New Registered Office Address:	FLAGLER DR #101 (Florida street address)
	ALM BEACH Florida 33407
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: amiliar with and accept the obligations of the position.
Signature of Neve	Registered Agent, if changing
ing matter of the w	regions on agont, if changing

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: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
Change Add Remove	T	Jo Perez-DuBois	1404 14th Court Palm Beach Gardens, FL 33410
2) Change Add Remove	丁	Joseph Escobar	225 179 Drive PH 603 Sunny Isles Beach, FL 33160
3) Change Add Remove	<u>S</u> _	Kristina Klaas	PO BOX 33563 Palm Beach Gardens, FL 33420
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			
			·

. If amending or adding additional Articutach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	NA

The date of each amendment(s) adoption: 10 01 2013 date this document was signed.	, if other than the		
Effective date if applicable: (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 10 02 13			
Signature			
(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)			
Brittany Agro (Typed or printed name of person signing)			
Chairman of the Board			
(Title of person signing)			