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FILED 2017 JUL 13 PH 4: 49 TALLAHASSEE PLUNDA

C. GOLDEN JUL 1 8 2017

COVER LETTER

TO: Amendment Section Division of Corporations Generational Cure Corp NAME OF CORPORATION: ____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Charles A. Williams (Name of Contact Person) Generational Cure Corp 21020 NW 141th p1 # 205 Mian: Bardens FJ 33189 (City/State and Zip Code) Generation Al Cure & Gobbo Kom E-mail address; (to be used hig surre annual report notification) For further information concerning this matter, please call:

Charles 4. Williams (Name of Contact Person) at <u>305-879-2369</u> (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 & \$\Box \$43.75 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

☑\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

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

·	Articles of Amendment to	FILED
	Articles of Incorporation	
0	of	2017 JUL 13 PM 4:4
(tres	dianal Care Cary as currently filed with the Florida I	2
(<u>Name of Corporation</u>	as currently filed with the Florida I	Pept. of State) ANASSEE, FLORIE
N130	0000 3765	<u> </u>
{Docu n	ent Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida Not For Pro</i>	fit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
uame must be distinguishable and contain the word "Company" or "Co." may not be used in the name		the abbreviation "Corp." or "Inc."
	-	
B. <u>Enter new principal office address, if applica</u> Principal office address <u>MUST BE A STREET A</u>		· · · · · · · · · · · · · · · · · · ·
r rincipal office address <u>MOST BE A STREET A</u>	<u>())((1.55</u>)	
C. Enter new mailing address, if applicable:	DAT:	
(Mailing address <u>MAY BE A POST OFFICE A</u>	<u>807</u>)	
		······································
 If amending the registered agent and/or registered agent and/or the new registered 		<u>r the name of the</u>
<u>Name of New Registered Agent:</u>	KOTIES K W:11; KOED NW 14++p1 #	<u>ans</u>
	21020 NW 14thp1 #	565
	(Florida	street address)
<u>New Registered Office Address</u> ;		_
	mion.	, Florida _ <u>337</u> 89 (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing F	tegistered Agent:	
hereby accept the appointment as registered agen	t. I am familiar with and accept the o	obligations of the position.

. . . .

-

Signature of New Registered Agent, 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)

. . •

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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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>V</u> <u>Mik</u>	<u>t Doe</u> <u>e Jones</u> <u>y Smith</u>	
<u>Type of Action</u> (Check One)	Title	Name	Address
1) X Change Add Remove	CFO	Charles A. Willions	21020 NW Htmp1 #05 miami, FI 33169
2) <u>X</u> Change Add Remove	p	Trace shoud Carter	530 UN JAIN & TETTACE M. am. F1 33169
3) X Change Add	<u>Dir</u>	Tinchny McFarlene	1786 S.E. CARVAILO S. MIAM, FI 33169
4) <u>X</u> Change Add Remove	Dir	Travis Gibson	P.O. BOX 612781 NOrth M.D. Fl 33261
- 5) <u>¥</u> Change Add Remove	<u>1r</u>	Shatonya patterson	21080 NW Hthpl Hdos mian; +1 33169
6) 🗶 Change Add Remove	E <u>x Sec</u> _	Joy Riley	1235 Nil 41 Street Mian, F/ 33/40
Kennive		Page 2 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:

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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.

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Example: <u>X.</u> Change <u>X</u> .Remove <u>X</u> .Add		Doe Jones Smith	
<u>Type of Action</u> (Check One)	Title	Name	Address
1) X Change Add Remove	Member	Ousha Jahasan	Midmi Gardens, FI 33/69
2) Change Add Remove	<u>membe</u> r	LAndre Anderson	1922 NW 47 Terrare m. ami, F1 33142
3) Change Add Remove	member	Neva Whittaker	1280 MW 201 Street M. Jm: Gardens, FI 330.56
4) Change X Add Remove	member	Demetris Brinfon	
5) Change Add Remove	h <u>iembe</u>	Jonell Schinkoster	
6) Change Add			
Remove		Page 2 of 4	

•••		
E.	If amending or adding additional Arti	cles, enter change(s) here:
	(uttach additional sheets, if necessary).	(Be specific)

	·····
·	

The date of each amendment(s) adoption: ______, if other than the

date this document was signed.

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 listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- - $\hat{\mathbf{U}}$ 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.

July 8,2017 Dated 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)

Chartes H. W! 11:3mS (Typed or printed name of person signing)

CEC

(Title of person signing)