N13000006486

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C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Inc.		
N13000006486 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted for	or filing.		
Please return all correspondence concerning this matter to the	following:		
Renee' Benson			
(Name	of Contact Perso	n)	- ,
Ladybyrd Live Foundation, Inc.			
(F	irm/ Company)	· · · · · ·	
5845 Thurgood Circle North			
	(Address)		
Jacksonville, FL 32219			
(City/ S	State and Zip Cod	le)	· · · · · · · · · · · · · · · · · · ·
Iblivefoundation@gmail.com			
E-mail address: (to be used for fut	ure annual report	notification)	
For further information concerning this matter, please call:			
Renee' Benson)4	601-6807
(Name of Contact Person)	at(A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	•	artment of S	tate:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43. Certificate of Status Certificate of Status (Add	. 75 Filing Fee & fied Copy litional copy is osed)	Certific Certific	Filing Fee cate of Status cd Copy onal Copy is

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

Enclosed)

Articles of Amendment to Articles of Incorporation of

PILLED SECRETARY OF STATE DIVISION OF CORPORATION

2016 SEP - 9 PM 3: 34

Ladybyrd Live Foundation, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N13000006486 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS C. Enter new mailing address, if applicable: N/A (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 new registered agent and/or the new registered office address: N/A Name of New Registered Agent: N/A (Florida street address) New Registered Office Address: N/A 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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	<u>v</u>	Kirk Brooks	6827 Browns Mill Walk
X Add			Lithonia, GA 30038
Remove			
2) Change	<u>s</u>	Kashia Cannon	120 Pond Run Lane
X Add			Jacksonville, FL 32218
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Amend Article III and please change to this new specific purpose:
The organization is organized exclusively for charitable and educational purposes under section 501(c)(3) of the Internal
Revenue Code, or corresponding section of any future federal tax code. To spread the awareness of HIV/AIDS through
comprehensive programs and services to people of all ages and backgrounds who are affected and infected by this disease.

	date of each amendme this document was signe	· · · · =	if other than the
		August 22, 2016	JUNE TARY OF STATE
		(no more than 90 days after amendment file date)	2018 SEP -9 PM 3: 34
		this block does not meet the applicable statutory filing requirements, the Department of State's records.	this date will not be listed as the
٨d٥	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was- was/were sufficient for	were adopted by the members and the number of votes cast for the a approval.	mendment(s)
	There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s f directors.) was/were
	Aug Dated	rust 22, 2016	
	Signature	New Ben	
	have	ne chairman or vice chairman of the board, president or other officer not been selected, by an incorporator – if in the hands of a receiver, r court appointed fiduciary by that fiduciary)	
	F	enee' Benson	
	_	(Typed or printed name of person signing)	
	C	EO and President	
	_	(Title of person signing)	