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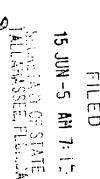
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

THE HEARTBEAT I	FOUNDATION CO	ORP.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	to the following:		
Andrea Ferreira			
((Name of Contact F	'erson)	
Assured Accounting and Tax Services			
· · · · · · · · · · · · · · · · · · ·	(Firm/ Compan	y)	
3350 NW 22nd Terrace Ste B-200			
	(Address)		
Pompano Beach, FL 33069			
(City/ State and Zip	Code)	
LUCIANO@LSENTERTAIN.COM			
E-mail address: (to be used	for future annual re	port notification)
For further information concerning this matter, please of	call:		
ANDREA FERREIRA	n	954 t	793-0353
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida	Department of	State:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & E Certificate of Status	☐\$43.75 Filing Fed Certified Copy (Additional copy enclosed)	Certifi is Certif	icate of Status icd Copy tional Copy is
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	rect Address mendment Secti ivision of Corpo lifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE HEARTBEAT FOUNDATION CORP.		
(Name of Corporation as c	currently filed with the Florida Dept, of St	tate)
N13000008969		
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida 5 mmendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For Profit Corpo</i>	ration adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbre	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDI</u>	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		e of the
Name of New Registered Agent:		
	(Florida street addre	ss}
New Registered Office Address:		
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the obligations	s of the position.
	Signature of New Registered Agent, if o	changing 25 5 E
	Page 1 of 4	HST.

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 De V Mike Jo SV Sally Se	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	C	SABRINA T. LARSON	5078 RIDGE DR
Add			LAS VEGAS, NV 89103
X Remove			
2) Change			
Add			
Remove			
3) Change			
<u>.</u> Add			
Remove			
4) Changa			
4) Change Add			
Add Remove			
Kemove	•		
5) Change			
Add			
Remove			
6) Change			
Add			
Add			

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E. <u>If amending or adding additional Art</u> (attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
ARTICLE VII		
Please change the address of:		
President Luciano Sameli		
New Address: 733 SE 1st Way # 210		
Deerfield Beach, FL 33441		

The date of each amendment(s) ac	Vantion: 06 01 2015	, if other than the
the date of each amendment(s) addate this document was signed.	loption:	, if Other than the
NSS-stire det is analisable.	06/01/2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the flicient for approval.	e amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The foliceach voting group entitled to vote separately on the amen	lowing statement dment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were add	opted by the incorporators without shareholder action and s	shareholder
action was not required.		
06/04		
Dated_ 06/01	12016	
Signature	irccor president or other officer - if directors or officers	have not been
	d, by an incorporator — if in the hands of a receiver, trustee	
	ted fidulesary by that fiduciary)	
	LUCIANO SAMELI	
	(Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	
	(Title of person signing)	