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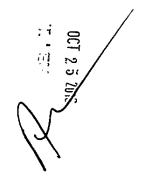
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COVER LETTER

TO: Amendment Section Division of Corporations

Educate from the Heart, I NAME OF CORPORATION:	Inc.		
N14000002316			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitte	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
AnaMaria Rivera			
(Na	me of Contact Pers	son)	
Educate from the Heart, Inc.			
	(Firm/ Company)		•
4963 SW 158th Way			
	(Address)	····	
Miramar, FL 33027			
(Cit	y/ State and Zip Co	ode)	
anamaria@educatefromtheheart.org			
E-mail address: (to be used for	future annual repor	t notification)
For further information concerning this matter, please call:	:		
AnaMaria Rivera	-	954-632-609!	
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made payable	le to the Florida De	partment of S	State:
()	43.75 Filing Fee & certified Copy Additional copy is enclosed)	Certifi Certifi	Difiling Fee cate of Status ed Copy ional Copy is sed)

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

	to Articles of Incorpora	tion
Educate F (Name of Corporation	of The The as currently filed with the contract of the contrac	e Heart, Inc. the Florida Dept. of State)
Educate from the Heart, Inc.	2002316	
(Docur	ment Number of Corporati	on (if known)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida</i>	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the Same	e corporation:	The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	Same	
(Francipul office dauress <u>MUST BE A STREET A</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or regi	stered office address in I	Florida, enter the name of the
new registered agent and/or the new register	Same	
<u>Name of New Registered Agent:</u>		
New Registered Office Address:	:	(Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing land the Registered Agent's Properties of the Appointment as registered agent the Appointment as registered agent the Registered Agent's Signature, if changing land the Registered Agent's Signature, if the Registered Agent's		accent the obligations of the position
i nereby accept the appointment as registered agen	n. i am jammar viin and	accept the congutations of the position.
-	Signature of New	w Registered Agent, if changing
	Page 1 of 4	ZUN OCT 20 TATTANASSEE

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>Mil</u>	<u>n Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Natasha Del Castillo	4963 SW 158th Way
Add X Remove			Miramar, FL 33027
X 2) Change	VP	Maria Yesenia Rivera	4963 SW 158th Way
Add			Miramar, FL 33027
Remove 3) Change	s	Lina Marcela Escobar	4963 SW 158th Way
X Add			Miramar, FL 33027
Remove			
4) Change			
Add			
5) Change			
Add			
Remove			
6) Change			
Add Remove			

E. <u>If amending or</u> (attach additiona	adding additional Arti ul sheets, if necessary).	icles, enter change (Be specific)	(s) here:		
		· · · · · · · · · · · · · · · · · · ·			
					
	 				
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			· · · · · · · · · · · · · · · · · · ·		
	 				
					
			 		

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 document's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wadopted by the board of directors.	ere
Dated October 12, 2016	
Signature(By the chairman of the board, president or other officer-if direct	
have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	
AnaMaria Rivera	
(Typed or printed name of person signing)	
President	
(Title of person signing)	