N14000004396

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COVER LETTER

Division of Corporations THE GENESIS PROJECT, INC. NAME OF CORPORATION: _ N14000004396 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Stephan Zuchner (Name of Contact Person) THE GENESIS PROJECT, INC. (Firm/ Company) 6619 S Dixie HWY #278 (Address) Miami, FL 33143 (City/ State and Zip Code) szuchner@tgp-foundation.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Stephan Zuchner 305 9897835 (Name of Contact Person) (Daytime Telephone Number) (Area Code) 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 & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations P.O. Box 6327

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

THE GENESIS PROJECT, INC.

(Name of Corporation as currently filed with the Flo N1-400000-4396	rida Dept, of State)		
	Number of Corporation	(it brown)	
(Document)	Number of Corporation	(11 Known)	
Pursuant to the provisions of section 617.1006, Florida 9 amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida N</i>	of For Profit Corporation adopts the f	ollowing
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.	rporation" or "incorpo	rated" or the abbreviation "Corp," or	r "Inc."
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>RESS</u>)	1	[[]]
		-	
			•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	9		- •
(Manual Construction of the Construction of th			-
	-		1: 16
D. If amending the registered agent and/or registere		orida, enter the name of the	
new registered agent and/or the new registered o	ffice address:		
Name of New Registered Agent:			
<u></u>			
New Registered Office Address:		(Florida street address)	
		12Lanido	
_	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Regis	stered Agent:		
I hereby accept the appointment as registered agent. I		eccept the obligations of the position.	
	Signature of New K	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	PT John Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	SD	MORALES, ROSARIO ISASI	950 BRICKELL BAY DRIVE - APT, 3100 MIAMI, FL 33131
x Remove			
2) Change Add	D	Howard Landis	2431 Indian Pipe Way, Naples, Florida 34105
Remove Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6)ChangeAdd			
Remove E. If amending or addin	ng additional Arti	cles, enter change(s) here:	
(attach additional shee			
			
	<u> </u>		

time magnet them Off Jones of the control for the Charles	
9/25/20 Effective date if applicable: (no more than 90 days after amendment file date)	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
	
	_ _

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(<u>CHECK ONE</u>)

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
09/10/20
Dated
Signature _ Mul
(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)
Stephan Zuchner
(Typed or printed name of person signing)
CEO
(Title of person signing)