N14 000 004396

(Requ	estor's Name)	
(Addre	ess)	
(Addre) ss)	
(City/S	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL.
(Busin	ess Entity Name	e)
(Docu	ment Number)	
Certified Copies	Certificates of	of Status
Special Instructions to Fili	ing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

The Genesis Project Inc

THE CICIESIS	riojectine	
NAME OF CORPORATION:		
N14000004396		
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning the Stephan Zuchner	his matter to the following:	
	(Name of Contact Perso	on)
The Genesis Project Inc		
	(Firm/ Company)	
10225 SW 59th Ave		
	(Address)	
Miami, FL 33156		
	(City/ State and Zip Coo	de)
szuchner@tgp-foundation.org		
E-mail address: (to	be used for future annual report	notification)
For further information concerning this matter	r, please call;	
STEPHAN ZU	14NER at 3	305 9897835
(Name of Contact	Person) (A	rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount	made payable to the Florida Dep	partment of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section		Address dment Section
A INCHARGIC SCHOOL	Amen	amen Jecuul

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

Article	es of Incorporation		אָנְרְךְ נמכיי
	of		
			: 5
Name of Corporation as currently filed with the Florida	Dept. of State)		
The Genesis Project Inc; N14000004396			7. Z
(Document Num	ber of Corporation (if know	wn)	
0	Fr. i. N		
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	les, this <i>Plorida Not For I</i>	<i>Toft Corporation</i> adopts the	Tollowing:
A. If amending name, enter the new name of the corpora	ttion:		
			The new
name must be distinguishable and contain the word "corpor	ation" or "incorporated"	or the abbreviation "Corp." (or "Inc."
"Company" or "Co." may not be used in the name.			
B. Enter new principal office address, if applicable:	NA		
(Principal office address MUST BE A STREET ADDRESS	5)		
	<u></u>		
			_
C. Enter new mailing address, if applicable:	NA		
(Mailing address MAY BE A POST OFFICE BOX)	1874		
			-
			
D. If amending the registered agent and/or registered off	fice address in Florida, er	iter the name of the	
new registered agent and/or the new registered office			
NA			
Name of New Registered Agent:			
	(Flore	da street address)	
New Registered Office Address:			
		171 a mido	
	(City)	, Florida (Zip Code)	
		(mp.s.me)	
New Registered Agent's Signature, if changing Registere			
I hereby accept the appointment as registered agent. I am J	amiliar with and accept th	e obligations of the position.	
	Signature of New Registere	rd 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>	<u>Name</u>	<u>Addres</u> s
Change x Add	D	Kevin Sami	205 East 10th Street Apartment 5E
Remove			NYC , NY 10005
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5/ Change Add			
Remove			
6) Change Add			
Remove			
(attach additional shee	og additional Arti ts, if necessary).	cles, enter change(s) here: (Be specific)	
NA			
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	8:7/2022				
The date of each amendment(s) adoption: date this document was signed.					_, if other than the
Effective date if applicable:	o more than 90 da	, -			
Note: If the date inserted in this block does	not meet the appli	cable statutory fil	ing requirements	s. 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)

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.				
	8/10/2022				
	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)				
	Stephan Zuchner				
	(Typed or printed name of person signing)				
	CEO				
	(Title of person signing)				

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