11400004483

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION	MITZI'S MISSION, I	NC.		
	4000004483			
DOCUMENT NUMBER:	<u> </u>			
The enclosed Articles of Amen	dment and fee are subm	itted for filing.		
Please return all correspondence	e concerning this matter	to the following:		
CHRIS KOCHER CPA				
	(Name of Contact Po	erson)	
LCI TAXES				•
441		(Firm/ Company	y)	
PO BOX 1711				
	"	(Address)		
BUNNELL, FL 32110				
	(City/ State and Zip	Code)	
CHRISKOCHER@LCITAXE	S.COM			
E-m	ail address: (to be used t	or future annual rep	oort notification)
For further information concern	ing this matter, please c	all:		
CHRIS KOCHER		at	386	586-3976
(N	ame of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	owing amount made pay	able to the Florida I	Department of S	State:
■ \$35 Filing Fee □	1\$43.75 Filing Fee & E Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Add	ress	Stı	eet Address	

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MITZI'S MISSION, INC.		
(Name of Corporation as cur	rently filed with the Flo	rida Dept. of State)
N14000004483		
. (Document No	umber of Corporation (if k	(nown)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
	· · · · · · · · · · · · · · · · · · ·	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u>)	
	-	18 18
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		基面
		THE PERSON
		<u> </u>
D. If amending the registered agent and/or registered		, enter the name of the
new registered agent and/or the new registered office	<u>ce address:</u>	
Name of New Registered Agent:	,	
	(F	lorida street address)
New Registered Office Address:		
<u> </u>	_	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accept	the obligations of the position.
	Signature of New Regis	tered 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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		_		-	
Add					
Remove					
4) Change		<u></u>		_	-
Add					
Remove				-	
5) Change					
Add		=		-	
Remove				-	
_ 				-	
6) Change		_		-	
Add				-	
Remove				-	

(attach additional sheets, if necessary). (Be specific)
ARTICLE III - PURPOSE
[THE EXISTING ARTICLE IS TO REMAIN, BUT ADD THE FOLLOWING AFTER THE EXISTING WORDING]
MITZI'S MISSION INC IS ORGANIZAED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND
SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO
ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS DESCRIBED UNDER SECTION 501(c)(3) OF
THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.
•

	te of each amer s document was	, ,	ption:	·	, if other than the
	e date <u>if applic</u>	3/12/1			
			(no more	than 90 days after amendment file date)	
	f the date insert nt's effective da			et the applicable statutory filing requirements, this date we's records.	vill not be listed as the
Adoptio	on of Amendme	ent(s)	(<u>CHECI</u>	K ONE)	
	e amendment(s) s/were sufficien		oted by the me	embers and the number of votes cast for the amendment(s)
	ere are no memi opted by the boa			vote on the amendment(s). The amendment(s) was/were	
	Dated	MARCH 12.	2018		
	Signature	Mich	recip C	handler	
		(By the chairm have not been	an or vice chai selected, by a	nirman of the board, president or other officer-if directors an incorporator – if in the hands of a receiver, trustee, or lary by that fiduciary)	;
		MICHELL	E CHANDLE	ER	
			(*	Typed or printed name of person signing)	
		DIRECTO	R		
				(Title of person signing)	