N1400006406

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COVER LETTER

TO: Amendment Section Division of Corporations PURPOSEFUL LIFE, INC NAME OF CORPORATION: N14000006406 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALEEM KANJI (Name of Contact Person) FINANCIAL ACCOUNTING SERVICES, PLC (Firm/ Company) 730 W COLONIAL DR. (Address) ORLANDO, FL 32804 (City/ State and Zip Code) FINACCTSVC@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 423-2371 407 ALEEM KANJI (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) Street Address Mailing Address Amendment Section Amendment Section

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

PURPOSEFUL LIFE, INC		16
(Name of Corporation as o	urrently filed with the Flor	ida Dept. of State)
N14000006406		3
(Document	Number of Corporation (if ki	iown)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo.	r Profit Corporation 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 abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADD)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	Ú	
	·	
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registere	ed office address <u>in Florida,</u>	enter the name of the
new registered agent and/or the new registered of		-
Name of New Registered Agent:		
_		orida street address)
New Registered Office Address:	·	
		, Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept	the obligations of the position.
	Signature of New Regist	ered 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	\underline{V} Mil	n Doc ce Jones cy Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
X Change	Р	Wajahat Khan	10731 Breaking Rocks Dr
Add	-		Tampa, FL 33647
Remove			
2) Change	VP	Wajahat Khan	10731 Breaking Rocks Dr
X Add			Tampa, FL 33647
Remove	S	Arif Ur Rehman	10731 Breaking Rocks Dr
3) Change Add			Tampa, FL 33647
Remove			
4) Change	P	Arif Ur Rehman	10731 Breaking Rocks Dr
X Add			Tampa, FL 33647
Remove			
5) Change			
X Add			
Remove			
6) Change			
Add			
Remove			

(attach additional shee	rts, if necessary).	(Be specific)			
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The date of each amendment(s) adoption: date this document was signed.	Jan	/3 '^	2017	, if other than the
Effective date <u>if applicable</u> :				
(n	o more than 90 days	after amen	dmens file date)	
Note: If the date inserted in this block does in the Department of	not meet the applicable of State's records.	le statutory	filing requirements, the	his date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)			
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the	number o	f votes cast for the ame	endment(s)
There are no members or members entit adopted by the board of directors.	led to vote on the ame	endinent(s)	. The amendment(s) v	vas/were
Dated				
Signature y William				
(By the chairman or v have not been selecte other court appointed	d, by an incorporator	- if in the	dent or other officer-if hands of a receiver, to	directors ustee, or
W	AJAHAT	KH	AN	
	(Typed or print	ed name of	person signing)	
ŕ	RESIDE N	17	•	
	(Titl	e of person	n signing)	