N14 000 009 148

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1

Office Use Only



100396308181

10/26/22--01009--005 **35.00

FILED
2022 OCT 26 MM 9: 40
SECRETARY SESTATI

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Empowered to Ch	ange International,	lnc	
N14000009148			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	ibmitted for filing.		
Please return all correspondence concerning this ma	itter to the following	g:	
Tresa McCarthy			
	(Name of Contac	et Person)	
McCarthy Accounting & Taxes, LLC			
	(Firm/ Comp	pany)	·
545 S Hercules Ave, Ste 301			
	(Address	5)	
Clearwater, FL 33764			
	(City/ State and 7	Zip Code)	
tresa@mccarthyaccounting.us			
E-mail address: (to be us	ed for future annua	report notification	
For further information concerning this matter, plea	se call:		
Tresa McCarthy		727 at	549-1786
(Name of Contact Perso	on)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Flori	ida Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certifi py is Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section		Street Address Amendment Secti	on

Division of Corporations P.O. Box 6327

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

FILED

2022 OCT 26 AM 9: 40

(Name of Corporation as currently filed with the F	lorida I	Dept. of State)		SECRETARY AS AT.
Empowered to Change International, Inc		Dept. of State) N 14 D D D D er of Corporation (if known	9148	TALLARYSEEF
(Documen	ıt Numb	er of Corporation (if know	wn)	
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	a Statute	es, this <i>Florida Not For I</i>	Profit Corpo	ration adopts the following
A. If amending name, enter the new name of the co	<u>orporat</u>	ion <u>:</u>		
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corpora	tion" or "incorporated"	or the abbre	The new viation "Corp." or "Inc."
B. Enter new principal office address, if applicable	o.•	6559 126th Ave		
(Principal office address MUST BE A STREET ADDRESS)		Largo, Florida 33773		
				·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6559 126th Ave		
		Largo, Florida 33773		
				
D. If amending the registered agent and/or registenew registered agent and/or the new registered			iter the nam	ne of the
	omice a	uui ess.		
Name of New Registered Agent:	****	1		
9	559 126			
New Registered Office Address:		(Florid	da street addres	(5)
	argo			Florida 33773
-		(City)	·	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.			e obligations	of the position.
			. 	
	Si.	gnature of New Registere	d Agent, if c	hanging

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 Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
Change Add		-		
Remove			-	
2) Change Add		-		
Remove 3) Change Add Remove		-		
4) Change Add		-	 	
Remove			-	
5) Change Add		_		
Remove				
6) Change Add		_		
Remove			<u>-</u>	
E. If amending or addin (attach additional shee.	g additio ts, if nece	<u>nal Arti</u> ssary).	<u>cles, enter change(s) here</u> : (Be specific)	
·	<u></u>			
	·			
				

			
	·		
			
			<u></u>
			
			<u></u>
			
			
The date of each amendment date this document was signed	t(s) adoption l.	1:	_, if other than the
Effective date if applicable:	November	1st 2022	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	nis block doe: he Departme	s not meet the applicable statutory filing requirements, this date will not lint of State's records.	oe listed as the
Adoption of Amendment(s)		(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap		by the members and the number of votes cast for the 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.
Dated 10/19/2022
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Michele Snyder
(Typed or printed name of person signing)
President

(Title of person signing)

2022 OCT 26 AM 9: 40