## N15000007828

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	: #)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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DIVISION OF CREDICATE N



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Little Fountains of Light. Inc. NAME OF CORPORATION: N15000007828 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alexis Marrero (Name of Contact Person) MDO Advisors, Inc. (Firm/ Company) PO Box 1289 (Address) Lutz, FL 33548 (City/ State and Zip Code) alex@mdo.tax E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 813-929-7878 Alexis Marrero at (Daytime Telephone Number) (Name of Contact Person) (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)

**Mailing Address** 

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

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

Enclosed)

(Additional Copy is

## Articles of Amendment to Articles of Incorporation of

Little Fountains of Light, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) N15000007828 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" 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; (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New 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	<u>V</u> <u>N</u>	ohn Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add			
Remove			
2) Change Add			2623 2023
Remove 3) Change Add Remove			\$ \$ P
4) Change Add			5 PH 12: 4
Remove			O *
5) Change Add		<del> </del>	
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		al Articles, enter change(s) here: sary). (Be specific)	
Upon the dissolution of the orga	nization, as <u>set</u>	is shall be distributed for one or more exempt purpose	s within the meaning of
Section 501(c)(3) of the Internal	Revenue Cod	le, or corresponding section of any future federal tax of	code, or shall be distributed
to the federal government, or to	a state or local	I government, for a public purpose.	
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The date of each amendment(s) adoption date this document was signed.	on;	_, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	es not meet the applicable statutory filing requirements, this date will not	be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

	October 18, 2023
	OCTORCT 16, 2025
Dated	· <u> </u>
Signatur	
	(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)
	Alexis Marrero
	(Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

2023 SEP 25 PM IS 1