

(Re	equestor's Name)	
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R. WHITE



COVER LETTER

TO: Amendment Section Division of Corporations

SACRED LIFE, INC.
N16000004568
OCUMENT NUMBER:
the enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
SONISE, CARRI
(Name of Contact Person)
SACRED LIFE, INC.
(Firm/ Company)
2690 NW 10TH AVENUE
(Address)
NORTH MIAMI, FL 33168
(City/ State and Zip Code)
onisecarri4@gmail.com
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
SONISE CARRI 305-989-293 8
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
nclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

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

Articles of Amendment to Articles of Incorporation of

FILED

17 NOV -7 PH 4: 15

SACRED LIFE, INC.		SEURE MANY OF EIN TAULAHASSEE FLOR
(Name of Corporation as cu	rrently filed with the Flor	rida Dept. of State)
N16000004568		
(Document ?	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporate	
B. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
C. E		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
 If amending the registered agent and/or registered new registered agent and/or the new registered off 		, enter the name or the
new registered agent and the new registered on		
Name of New Registered Agent:		
No. Books and Office Address	(F	lorida street address)
<u>New Registered Office Address:</u>		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	ered Agent:	
hereby accept the appointment as registered agent. To		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>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X 1) Change	P	CARRI, SONISE	12690 NW 10TH AVENUE
Add	 		NORTH MIAMI, FL 33168
Remove			
x 2) Change	С	BAZILE, KENTLINE	17130 NW 27TH AVENUE
Add			MIAMI GARDENS, FL 33056
Remove	т	BONAMI, RUTH	510 NW 109TH STREET
3) Change			MIAMI, FL 33168
Add			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti utach additional sheets, if necessary).	(Be specific)			
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	10/17/2017	
The date of each amendment(s) adop late this document was signed.	otion:	_, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not be truent of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop was/were sufficient for approval.	oted by the members and the number of votes east for the amendment(s)	
☐ There are no members or member adopted by the board of directors	es entitled to vote on the amendment(s). The amendment(s) was/were	
Dated	117/2017	
have not been	antor vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	_
other court ap	Sprise Carri	
	(Typed or printed name of person signing) Prisident (Title of person signing)	

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