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COVER LETTER

TO: Amendment Section **Division of Corporations**

FREE USA KARATE SE NAME OF CORPORATION:	ELF DEFENSE MART	AL ARTS ACADEMY	INC
N16000005992 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	d for filing.		
Please return all correspondence concerning this matter to	the following:		
CLAYTON POWELL			
(Nai	me of Contact Person)		
FREE USA KARATE SELF DEFENSE MARTIAL ART	S ACADEMY INC		
	(Firm/ Company)		ATTACHE THE PARTY OF THE PARTY
2330 NW 174TH TERRACE			
	(Address)		
MIAMI GARDENS, FL 33056			
(City	y/ State and Zip Code)		
NATACHA@TAXPILOTCONSULTING.COM		1	
E-mail address: (to be used for	future annual report not	ification)	
For further information concerning this matter, please call:			
NATACHA DESAMOURS	877 at	685-0002	
(Name of Contact Person)		Code) (Daytime Telep	hone Number)
Enclosed is a check for the following amount made payable	e to the Florida Departs	nent of State:	
(A	43.75 Filing Fee & left field Copy additional copy is inclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	

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

FREE USA KARATE SELF DEFENSE MARTIAL ARTS ACADEMY INC.

(Name of Corporation as curre	ntly filed with the Flor	rida Dept. of State)
FREE USA KARATE SELF DEFENSE MARTIAL ARTS	ACADEMY INC,	
(Document Num	ber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
		The new
name must he distinguishable and contain the word "corpord "Company" or "Co." may not be used in the name.	ation" or "incorporated	I" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	<u> </u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	7
		A P
		<u> </u>
C. Enter new mailing address, if applicable:		14 25 14
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		pro- (pr)
		<u> </u>
		200
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		enter the name of the
Name of New Registered Agent:		
	(F)	orida street address)
New Registered Office Address:	,	
•		. Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fi		the obligations of the position.
	Signatura of New Rogis	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 = Trustec; 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	PT V SV	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Rémove				
2) Change	···	_		
· Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
•				
ARTICLE VI				
UPON THE DISSOLUTION OF THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE				
EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE,				
OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO THE				
FEDERAL GOVERNMENT, OR TO A STATE OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRBIUB				
TO THE FEDERAL GOVERNMENT, OR TO A STATE LOCAL GOVERNMENT, FOR A PUBLIC PURPOSE. ANY				
SUCH ASSETS NOT DISPOSED OF SHALL BE DISPOSED OF BY A COURT OF COMPETENT JURISDICTION				
IN THE COUNTY IN WHICH THE PRINCIPAL OFFICE OF THE ORGANIZATION IS THEN LOCATED,				
EXCLUSIVELY FOR SUCH PURPOSES OR TO SUCH ORGANIZATION OR ORGANIZATIONS, AS SAID COURT				
DETERMINE, WHICH ARE ORGANIZED AND OPERATED EXCLUSIVELY FOR SUCH PURPOSES.				

	e date of each amendment(s) adoption:
Effe	ective date if applicable:
	(no more than 90 days after amendment file date)
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument's effective date on the Department of State's records.
Ada	option of Amendment(s) (<u>CHECK ONE</u>)
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	APRIL 10, 2017 Dated
	Signature Antun Durill
	(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)
	CLAYTON POWELL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)