N16000006541

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Righteous Touch, Inc	:		
	N16000006541			
DOCUMENT NUMBER:				
The enclosed Articles of Ar	mendment and fee are subr	nitted for filing.		
Please return all correspond	lence concerning this matte	er to the following:		
Myrtle E Perdue				
		(Name of Contact Person	n)	
Righteous Touch Inc.				
		(Firm/ Company)		
15953 SW 15th Street				
		(Address)		
Pembroke Pines, FL 33	027			
		(City/ State and Zip Cod	e)	
myperdue@bellsouth.no	et			
	E-mail address: (to be used	for future annual report	notification	1)
For further information con	cerning this matter, please	call:		
Myrtle E Perdue		954 at	4 4429970	
	(Name of Contact Person)) (Ai	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	yable to the Florida Dep	artment of	State:
■ \$35 Filing Fee	□\$43,75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is ised)
Mailing	Address	Street	Address	

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

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

Articles of Amendment to Articles of Incorporation of

Righteous Touch, Inc.		
(Name of Corporation as currently filed with the Florida	a Dept. of State)	
N16000006541		
(Document Nun	nber of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Florida Statiamendment(s) to its Articles of Incorporation:	utes, this Florida Not For F	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	<u>ration:</u>	
N/A		The new
name must be distinguishable and contain the word "corpor" (Company" or "Co." may not be used in the name.	ration" or "incorporated" o	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES	<u>SS</u>)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	<u> </u>
D. If amending the registered agent and/or registered of		ter the name of the
new registered agent and/or the new registered office	e aduress:	
Name of New Registered Agent:		
	(illow)	la street address)
New Registered Office Address:	(Floric	a meet uuressy
N/A		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the	obligations of the position.
	Signature of New Registere	d 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 <math>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 John Do V Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change AddX Remove	<u>D</u>	McKinney, George	Ft. Myers, Fl. 33905
2) Change Add	D	Warren, Terry	5614 Superior Drive Lakeland, FL 33805
X Remove 3) Change Add X Remove	ST	Zanderş, Rosalyn	3795 Juliet Leila Circle West Jacksonville, FL 32218
4) Change Add	CEO/Fo	Perdue, Myrtle E	Pembroke Pines, F1.33027
 X Remove 5) Change Add 	<u>s</u>	Zanders, Rosalyn C.	3795 Juliet Leila Circle West Jacksonville, Fl. 32218
Remove 6) Change Add	Р	Perdue, Myrtle E	15953 SW 15th Street Pembroke Pines, FL 33027
Remove F. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
N/A			

The date of each amendment(s) adoption:			
Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	N/A		
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document's effective date on the Department of State's records.		(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	Note: If the date inserted in this block of document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date value of State's records.	vill not be listed as the
	Adoption of Amendment(s)	(CHECK ONE)	

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.			
	Dated	December 15, 2020		
	Signature	Mentle & Berdue By the Chairman or vice chairman of the board, president or other officer-if directors		
		By the Lenairman 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)		
		Myrtle E Perdue		
		(Typed or printed name of person signing)		
		President		
		(Title of person signing)		