## N17000004a31

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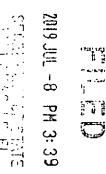




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Award

## COVER LETTER

TO: Amendment Section Division of Corporations People Pushing Forward, Inc NAME OF CORPORATION: \_\_ N17000004231 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jaleesa Mason (Name of Contact Person) People Pushing Forward, Inc. (Firm/ Company) 1019 Rainbow Ave (Address) Pensacola, FL 32505 (City/ State and Zip Code) peoplepushingforward@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 291-3621 Jaleesa Mason (Davtime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □ \$35 Filing Fee □ \$43.75 Filing Fee & ■\$43.75 Filing Fee & Certified Copy Certificate of Status 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

(Additional Copy is

Enclosed)

## Articles of Amendment to Articles of Incorporation of

		of			
People Pushing Forward, Inc					
(Name of Corporation	n as curren	tly filed with the Flo	rida Dept. of State)		
\$17000004231					
(Doca	ıment Numb	er of Corporation (if k	(nown)		
presure to the provisions of section 617,1006. Fluendment(s) to its Articles of Incorporation:	orida Statute	es, this <i>Florida Not Fe</i>	or Profit Corporation add	ppts the followin	
. If amending name, enter the new name of the	ne corporat	ion:			
				The nev	
ime must be distinguishable and contain the wor		tion" or "incorporate	$d^{\prime\prime}$ or the abbreviation $^{\prime\prime}$	orp." or "Inc.	
Company" or "Co." may not be used in the nan	<u>ne</u> .	100			
Enter new principal office address, if applic			<del></del> .		
rincipal office address <u>MUST BE A STREET.</u>	<u>ADDRESS</u> [	)			
				<del></del>	
				727	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	· PANO	NIA		اع و	
(Studing duaress SIAT BE A POST OFFICE	<u>. BUA</u> )	1271			
If amending the registered agent and/or reg	istored offic	so addraw in Klarida	antar the name of the	ု ့	
new registered agent and/or the new register	red office a	<u>ddress:</u>	, enter the name of the	12 S	
Name of New Registered Agent:	Jaleesa M	ason			
	1019 Rair	nbow Ave	· i	7.	
		- CF	lorida street address)		
New Registered Office Address	i:				
	Pensacola 3250 , Florida		2505		
				Code)	

## 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 officeridirector 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 Doc, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:  X Change X Remove X Add		<u>Doc</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change		NIA	
Add Remove			
2) Change			
Add Remove			
3 ) Change			
Add Remove			
4) Change			
Add			
Remove			
5) Change Add			
Remove			
6) Change			
Add			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
The organization is organized exclusively for charitable, religious, educational, and scientific purposes under
section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.
Upon the dissolution of this 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 or local government, for a public purpose.
·

The date of each amendn		, if other than the
date this document was sig		
Effective date if applicab	07/01/2019 le:	
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will no in the Department of State's records.	t be listed as the
Adoption of Amendment	s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were sufficient for	s/were adopted by the members and the number of votes east for the amendment(s) r approval.	
There are no members adopted by the board	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
07 Dated	/01/2019	
Signature	maxon	
ha	the chairman or vice chairman of the board, president or other officer-if directors or not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)	
	Jaleesa Mason	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	