N1700004917

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SECRETARY OF STATE OIVISION OF CORPORATIONS

MAY 18 2017 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: UNSPOKEN TRUT	H ORGANIZATION IN	C.		
N17000004917 DOCUMENT NUMBER:				•
The enclosed Articles of Amendment and fee are sub-	nitted for filing.			
Please return all correspondence concerning this matte	_			
JACQULINE NEAL-MORGAN	•			
	(Name of Contact Perso	n)		
	(Firm/ Company)			
16945 NW 14TH AVENUE				17 MA
	(Address)			<u> </u>
MIAMI, FLOIRDA 33169				5 PM 2: 56
	(City/ State and Zip Cod	e)		- 73 {
jmorgan0907@outlook.com				56
E-mail address: (to be used	for future annual report	notification	1)	
For further information concerning this matter, please	call:			
JACQUELINE NEAL-MORGAN	30 at	5-915-599:		
(Name of Contact Person)			(Daytime Telephone N	lumber)
Enclosed is a check for the following amount made page	yable to the Florida Depa	irtment of	State:	
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	-
Mailing Address				
Amendment Section Division of Corporations		ment Section of Corne		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

UNSPOKEN TRUTH ORGANIZATION INC.

UNSPUKEN TRUTH ORGANIZATION INC		page 1
(Name of Corporation	as currently filed with the Florid	a Dept. of State)
N17000004917		
(Docur	nent Number of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	• .	Profit Corporation adopts the following
A. If amending name, enter the new name of the	e corporation:	
name must be distinguishable and contain the word	d "corporation" or "incorporated"	or the abbreviation "Corn" or "Inc."
"Company" or "Co." may not be used in the nam		or the docrettation corp. or the
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>		
		
•	<u>- </u>	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	
·		
D. If amending the registered agent and/or registered registered agent and/or the new register	stered office address in Florida, er ed office address:	nter the name of the
Name of New Registered Agent:	JACQUELINE NEAL MORGAN	•
New Registered Office Address:	(Flori	da street address)
	(City)	, Florida (Zip Code)
	(City)	(Zip Coue)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen		e obligations of the position
посьод иссерь те арронитет из гедіменей иден	тын јанина мин ини иссері ш	e congunous of the position.
	•	•
-	Signature of New Register	ed Agent if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nar	me, 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>M</u>	hn Doe ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	p	JACQUELINE NEAL MORGAN	16945 NW 14TH AVE
Add			Miami, Fla 33169
Remove			
2) X Change	<u>T</u>	DEBRA MORGAN	2227 WEST 6TH COURT
Add			HIALEAH, FL 33010
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)				
ORIGINAL FILING HAD DUPLICATE VP AND LAST NAME OF PRESIDENT & REGISTERED AGENT WAS SUBMITTED WITH INCORRECT LAST NAME SEQUENCE.				
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The date of each amendment(s) adoption:	, if other than the
05/08/2017 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 document's effective date on the Department of State's records.	will 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 was/were sufficient for approval.	(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	;
05/08/2017 Dated	
Signature Daguerio Nead-Morgan	
(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)	
JACQUELINE NEAL-MORGAN	
(Typed or printed name of person signing)	-
PRESIDENT	
(Title of person signing)	-