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COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORP	ORATION:	Girls2Won	nen Inc	
DOCUMENT NU	CUMENT NUMBER: N17000007589			
	•	ee are submitted for filing this matter to the followi		
		Sonia Be	есегга	
		(Name of Cont	act Person)	
		Swyft Fi	lings	
		(Firm/ Cor	npany)	
		12605 East Free	eway Suite 509	
		(Addre	ss)	
		Houston, Tex	(as 77015	
		(City/ State and	Zip Code)	
		filings@swyf	tfilings.com -	
For further inform	E-mail address: (ation concerning this ma	to be used for future annutter, please call:	al report notification)	
	Sonia Becerra		at877-777-0450	
	(Name of Conta	nct Person)	(Area Code) (Daytime Telephone Number)	
	_		rida Department of State:	
XS35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Ā	Aailing Address .mendment Section Division of Corporations		Street Address Amendment Section Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Girls2Women Inc

(Name of Corporation as currently filed with the Florida Dept. of State) N17000007589 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

Page 1 of 4

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DIR	TAVUNDA O NEIDRANA	1707 WEST VINITA ROAD AVON PARK, FL 33825
Add X Remove			
2) Change	DIR	KING S JOHNSON	1707 WEST VINITA ROAD AVON PARK, FL 33825
Add X Remove			
3) Change	DIR	Olivia Gray	1700 HIAWATHA AVENUE SEBRING, FLORIDA 33870
X Add Remove			
4) Change	DIR	Shirley Johnson	202 Williams/Gray Court
Add Remove			AVON PARK, FL 33825
5)Change	DIR	Tavunda Odom	2304 North Roxbury Road
Add Remove			AVON PARK, FL 33825

t. It amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
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The date of each amendment(s) a	doption:
	, if other than the date this document was signed.
Effective date <u>if applicable</u> :	
 	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were acwas/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.
XThere are no members or m adopted by the board of directors	embers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated	ly 31,2017
Signature	Ma O Seaser Lirls Women Inc.
have not been sele	rnigh or vice chairman of the board, president or other officer-if directors cited, by an incorporator – if in the hands of a receiver, trustee, or steed fiduciary by that fiduciary)
	Nya Seaser
	(Typed or printed name of person signing)
	President

(Title of person signing)