N17000195

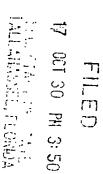
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COVER LETTER

TO: Amendment Section
Division of Corporations

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B	MONTE OF A CHILL	NEW ATION O	177	
NAME OF CORPORATIO	VOICE OF A CHILE N:	T NOT AGNOUT	···	
DOCUMENT NUMBER: _	N17000010195			
The enclosed Articles of Ame	ndment and fee are subm	itted for filing.		
Please return all corresponder	ace concerning this matter	to the following:		
BABY VARKEY				
	(Name of Contact Pe	rson)	
VOICE OF A CHILD F	OUNDATION INC			
	• • •	(Firm/ Company)	
15	893 SW 63 TERRACE.			
		(Address)		
MIAMI, FL, 33193				
	(City/ State and Zip (Code)	
bv@varkeyepa.com				
E-i	nail address: (to be used t	or future annual rep	ort notification)
For further information conce	rning this matter, please c	all:		
BABY VARKEY		at	786	473 3213
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pay	able to the Florida D	epartment of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	3\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Ac	dress	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VOICE OF A CHILD FOUNDATION INC

(Name of Corporation as curre	ently filed with the Flori	da Dept. of State)
N17000010195		
(Document Nun	nber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	utes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
DREAM OF A CHILD FOUNDATION INC.		The new
name must he distinguishable and contain the word "corpor "Company" or "Co." may not he used in the name.	ration" or "incorporated	" or the abbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES,	N/A S)	
metput office dealess most barriers most barriers	<u></u>	
		五 五
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	OCT 3
		-
		ω
		5 5
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		enter the name of the
N/A	· augress:	
Name of New Registered Agent:	-	
	(Flo	rida street address)
New Registered Office Address:	,	
		, Florida
· -	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j		he obligations of the position.
	Signature of New Registe	red 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 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 V Mike SV Sally	Doc Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)
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	. 10/27/2017	
The date of each amendmen		, if other than the
date this document was signed	t.	
	01/01/2018	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not be the Department of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
There are no members or adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	7/2017	
Dated		
	Λ	
Signature	$\langle \langle \langle \langle \langle \rangle \rangle \rangle \rangle$	
	e chairman or vice chairman of the board, president or other officer-if directors	-
	not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
	court appointed fiduciary by that fiduciary)	
В	BABY VARKEY	
_	(Typed or printed name of person signing)	
,	VICE PRESIDENT	
	(Title of person signing)	