## N 18 0 0 0 0 0 1 2 8 4

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	13 Training Academy Inc		
N1800001284			
DOCUMENT NUMBER:		<del>-</del>	
The enclosed Articles of Amendment and fee	are submitted for filing.		
Please return all correspondence concerning th	nis matter to the following:		
Ashanti Williams			
	(Name of Contact Pers	son)	
Gameface 4:13 Training Academy Inc			
	(Firm/ Company)		
6001 Argyle Forest Blvd Ste 12 PMB			
	(Address)		
Jacksonville, FL 33224			
	(City/ State and Zip Co	ode)	
ashanti@gameface413.org			
E-mail address: (to	be used for future annual repo	rt notification)	
For further information concerning this matter	, please call:		
Sean Williams		561-899-4412	
(Name of Contact		Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount	made payable to the Florida De	partment of State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of		Certificate of Status	
Mailing Address Amendment Section Division of Corporations	Ame	et Address ndment Section sion of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Gameface 4:13 Training Academy Inc

(Name of Corporation as currently filed with th	e Florida Dept. of State)	
N18000001284		1
(Docum	nent Number of Corporation (if known	<del></del>
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not For Pro</i>	fit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u> )	
	-	
D. Managadian share is a set of the set		
<ul> <li>If amending the registered agent and/or reginew registered agent and/or the new register</li> </ul>	<u>stered office address in Florida, ente</u> red office address:	r the name of the
-	Williams Accounting Services	
Name of New Registered Agent:		
	405 N Rosemary Ave	
New Registered Office Address:		street address)
New Neglistered Office Mataress.	West Palm Beach	33401
	(City)	, Florida <u> </u>
<b>.</b>	•	, ,
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered Agent: it - Lain familianwills and accept the o	bligations of the position
The state of the s		ongaions of the position,
	Signature of New Registered	Agent if changing

Page Lof 4

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: $\underline{X}$ Change $\underline{X}$ Remove $\underline{X}$ Add	<u>V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
Remove			
2) Change Add	<del></del>		
Remove 3 ) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add		<u> </u>	
Remove			
E. If amending or add (attach additional she		Page 2 of 4 <u>nal Articles, enter change(s) here</u> : <u>sary). (Be specific)</u>	

	<del>-</del>	<del></del>
		<del></del> _
		<del></del>
		<del></del>
	- 7	
		<del></del> _
		<del></del>
	Page 3 of 4	
The date of each amendment(s) ad date this document was signed.	option:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocdocument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not boartment of State's records.	pe listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes east for the amendment(s)	

Dated	November 25, 2019
Signature	
	(By the chairman of 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)
	Ashanti Williams
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.