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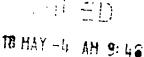
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Power in Autism,	Inc.			
DOCUMENT NUMB	ER:				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this ma	tter to the following:			
	Jennifer M Garcia				
_		Name of Contact Person	1		
ı	Power in Autism, Inc.				
_		Firm/ Company			
	575 Golf Course Blvd				
_	Address				
(Opalocka, Fl, 33054				
		City/ State and Zip Cod	е		
Jennif	ermichellegarcia@gmail.c	com			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Jennifer M Garcia		786 at (901-3347		
Name of	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amer Divis P.O. I	ing Address Indment Section It ion of Corporations Box 6327 Inassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Power In Autism, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State); N18000004264 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) 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: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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.

X Change	<u>PT</u> <u>Jo</u>	<u>hn Doe</u>	
X Remove	<u>v</u> <u>M</u>	like Jones	
X Add	<u>SV</u> <u>S</u> a	ally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	ED	Whitney Powell	7910 NW 72ND AVE
Add			Tamarac, Fl 33321, US
Remove			
2) Change	\$	Catherine Garcia	575 Golf Course Blvd
Add			Opalocka, FI 33054, US
Remove			
3) Change	VP	Moises Reynoso Jr	5400 nw 159th St, Apt 101
Add		 -	Miami Lakes, Fl 33014
Remove			
4) Change	MD	Shantelle Reyes	575 Golf Course Blvd
Add			Opa locka, FI 33054
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)
The corporation is organized exclusively for charitable and educational,
purposes, including, for such purposes, the making of distributions to organizations that
qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or
the corresponding section of any future federal tax code. This non profit organization is dedicated to provide the
the society and the members of the community a new perspective of the capability of the autistic children and ad
Providing educational attributes as well as unity between the society and the autistic community.
· · · · · · · · · · · · · · · · · · ·
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		745
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
04/20/201 Dated	8	
Signature <u>Le</u>	nnifer Michelle Garcia	
(By a d selected	rector president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Jennifer Michelle Garcia	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	