N1800000 4424

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	CHALLENGE 2 (CHANGE FOUND	ATION	INC		
N18 DOCUMENT NUMBER:	8000004424					
The enclosed Articles of Amenda	ient and fee are sub	omitted for filing.				
Please return all correspondence of	oncerning this mat	ter to the following:				
ORONDE TALIAFERRO						
		(Name of Contact	Persor	1)		_
CHALLENGE 2 CHANGE FO	UNDATION INC					
		(Firm/ Compa	iny)			
995 NW 119 ST, # 1871						
		(Address)				_
MIAMI, FL. 33168						
	-	(City/ State and Zi	p Code	e)	<u> </u>	
oronde@challenge2change.or	rg					
E-mail	address: (to be use	d for future annual i	report i	notification	n)	_
For further information concerning	g this matter, please	e call:				
ORONDE TALIAFERRO			31(at	3	680-1235	
(Nam	e of Contact Person			ea Code)	(Daytime Telephone Number)	
Enclosed is a check for the follow	ing amount made p	ayable to the Florid	a Depa	artment of	State:	
■ \$35 Filing Fee □\$4	3.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy is sed)	
Mailing Addres	<u>ss</u>	<u>s</u>	Street A	Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

CHALLENGE 2 CHANGE FOUNDATION INC	UI .		SECH	2020 /
(Name of Corporation as currently filed with the Flori	da Dept. of State)			5
N18000004424				77
(Document No	umber of Corporation (if k	nown)		R
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not Fo</i>	or Profit Corporation ac	1777	N
A. If amending name, enter the new name of the corpo	oration:		•	
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated	i" or the abbreviation '	'Corp."	The new or "Inc."
B. Enter new principal office address, if applicable:	18003 NW 87th Pl	_ACE		
(Principal office address MUST BE A STREET ADDRE	HIALEAH, FL. 330	118		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18003 NW 87th P	LACE		-
	HIALEAH, FL. 330	18 		_
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, ce address:	enter the name of the		
Name of New Registered Agent:	NDE TALIAFERRO			
1800	3 NW 87th PLACE			
New Registered Office Address:	(Fl	lorida street address)		
HIAL	EAH	, Florida	33018	i
	(City)	(Zip C	ode)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accept	the obligations of the po	osition.	
 _	Signature of New Regist	ered Agen of 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 De V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add Remove	PTD	ORONDE TALIAFERRO	18003 NW 87th PLACE HIALEAH, FL. 33018
2) Change Add	PTDS	ROBERT LOUIS BROWN III	995 NW 119 ST # 1871
X Remove 3) Change Add X Remove	_D	ROBERT BROWN JR	MIAMI, FL. 33168 995 NW 119 ST # 1871 MIAMI, FL. 33168
4) Change Add X Remove	<u>D</u>	RACHEL ULLOA	995 NW 87th ST # 1871
5) Change Add	DCFO	KAYLEE RODRIGUEZ	MIAMI, FL. 33168 18003 NW 87th PLACE HIALEAH, FL. 33018
Remove 6) Change Add	DTRS	LOURDEZ RODRIGUEZ	18003 NW 87th PLACE HIALEAH, FL. 33018
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
	- ,		

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The date of each amendment(s) ad date this document was signed.	AUGUST 26, 2	2020		, if other than the
Effective date if applicable:				
Enecuve date it applicable:	(no more than 90 de	iys after amendment fil	e date)	
Note: If the date inserted in this blo- document's effective date on the Dep	ck does not meet the appli	cable statutory filing re		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(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
AUGUST 26, 2020 Dated				
Signature Ononde Talisperro				
(By the chairman or vice chairman of the board, predident 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)				
ORONDE TALIAFERRO				
(Typed or printed name of person signing)				
DIRECTOR				
(Title of person signing)				