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(Business Entity Name)	09/28/1801012018 **35.00
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Zero Hate Inc				
	00005097				
The enclosed Articles of Amends		mitted for filing.			
Please return all correspondence of	concerning this matte	er to the following:			
David Vandygriff					
and the state of t		(Name of Contact	Person)		
Zero Hate Inc					
		(Firm/ Compa	ny)		
2941 Plum St					
····		(Address)			
Jacksonville, FL 32205					
		(City/ State and Zi	p Code)		
publisher@cityxtramagazine.con	1				
E-mai	address: (to be used	for future annual r	eport notific	cation.	)
For further information concerning	g this matter, please	call:			
David Vandygriff		;	904		8449160
(Nan	ne of Contact Person			ode)	(Daytime Telephone Number)
Enclosed is a obeck for the follow	ring amount made pa	yable to the Florid:	a Departmen	nt of S	tate:
	43.75 Filing Fee & Tertificate of Status	S43.75 Filing Fe Certified Copy (Additional copy enclosed)	vis C	Certific Certific	Filing Fee cate of Status and Copy is sed)
Mailing Address		<u>s</u>	treet Addr	ess	

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

Zero Hate Inc (Name of Corporation as	currently filed with the Florid:	Dept. of State)
	Number of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For F	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated" (	or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u> </u>	5 ∞
		SER 28
D. If amending the registered agent and/or register		
new registered agent and/or the new registered	office address;	ON 2
Name of New Registered Agent:		<u> </u>
——————————————————————————————————————	(Floria	la street address)
		121 - 12
	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		obligations of the position.
	Signature of New Registere	

## 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 hold. 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 Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change	<del></del>			
Add				
Remove				
3.) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	<del></del> .	_		
Add				
Remove				
6) Change	<u></u>	_		
Add			<del></del>	
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Said organization is organized exclusively for charitable, religious, eductional, and scientific purposes, including, for such
purposes, including, for such purpose, the making of distributions to orgazations that qualify as expempt organizations
described under Section 501(e)(3) of the Internal Revenue Code, or corresponding section of any future fenderal tax code.
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of
Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future fendral tax code, or shall be
distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed
of shall be disposed of by a court of competent jurisdiction in the county in which the principal office of the organization is
then located, exclusively for such purposed or to such organizations or organizations, as said Court shall determine, which
are organized and operated exclusively for such purposes.

	9/21/2018	
The date of each amend date this document was s	lment(s) adoption: igned.	_, if other than the
Effective date <u>if applica</u>	9/21/2018	
rmeetive date <u>ir applica</u>	(no more than 90 days after amendment file date)	
	I in this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.	be listed as the
Adoption of Amendmer	ot(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
☐ There are no member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.	
Dated _	0/21/2018	
Signature		_
ŀ	By the chairman or 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)	
	David Vandygriff	
	(Nyped or printed name of person signing)	
	(Title of person signing)	