## N18000005744

(Red	questor's Name)	
(Add	dress)	•
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

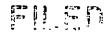
Tallahassee, FL 32314

NAME OF CORPORATION: Aisling Visionar Center Inc.
DOCUMENT NUMBER: N 1800008744
DOCUMENT NUMBER: N 1800000 117
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Terrinique Bannex (Name of Contact Person)
(Firm/ Company)
1800 NW 4th AVC AP+ #3 (Address)
Boca Raton FL 33432 (City/ State and Zip Code)
Terrinique bassand com E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
Terrinique Banner at 50 674-448 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation



Articles of Incorporation of

Aisling Vision	nary Center Inc 2021 OCT 21 AM 9: 32
(Name of Corporation as currently filed with the Florid	la Dept. of State) SECRETARY OF STATE
11120000	OT HA
(Document Nu	niber of Corporation (if known)
	•
Pursuant to the provisions of section 617,1006. Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:
N/A	The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
	N
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	<u> </u>
(Trincipal office duaress prost be a street apports	<u></u>
C. Enter new mailing address, if applicable:	821 Boca Raton
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	To sold feeting
	<u>FL 33429</u>
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered offic	E ROUTESS.
Name of New Registered Agent:	N/ R
Nov. Dominton of Office (1) days	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:
I hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
	N/A
	Signature of New Registered Agent, if changing
	pigument of the contraction of the formation

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

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.

held. President, Treasurer, Director would be PTD.

Example: X Change X Remove A Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>V</u>	Malaysha Patkson	1800 NW 4th AVC APT#3 Beca Rabon FL 33432
Remove  2) Change Add	<u>S</u> _	Mya Perry	4846 Pond Pine way Greenerces FL 33403
Remove 3 )			
4) Change Add		<del></del>	
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sh		rticles, enter change(s) here: . (Be specific)	
Pur Posc:	Article	III Aisling V	isionary center
is a moblie	<u>inasic</u>	learning Center that	will be prividing
the youth	with the	learning Center that resources to create environment to work a	. music electronically:
Giving the	ma safe	environment to work a	with others and
0~ (1) (0	SOLF DUD	CBCC. YN	

The date of each amendment(s) adoption: 7/27/2021
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.

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<b>93</b>	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.