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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Youth Evolvement So ON:	ervices, Inc.	 	
DOCUMENT NUMBER:	N18000009304			
The enclosed Articles of An	nendment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
		Sherman Mel	vin	
	1	(Name of Contact F	Person)	
		(Firm/ Compar	ny)	
		1931 Avenue F		
		(Address)		
		Riviera Beach, FL	33404	
		(City/ State and Zip	Code)	
	youth	evolvementservices		
For further information cond			port nouncation	1)
	Sherman Melvin		407	389-22440
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	following amount made pay	able to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & I Certificate of Status	_	Certif is Certif	O Filing Fee licate of Prices lied Copy tional Copy is osed)
Mailing A			treet Address mendment Secti	ion
Amendment Section		Division of Corporations		

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

Youth Evolvement Services, Inc.

(Name of Corporation as curre	ntly filed with the Flor	ida Dept. of State)	
N	18000009304		
(Document Num	ber of Corporation (if ki	nown)	-
rsuant to the provisions of section 617.1006, Florida Statut endment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	er Profit Corporation adopts the	e following
If amending name, enter the new name of the corpora	<u>tion:</u>		
ncere 2000 Foundation, Inc.			_The new
me must be distinguishable and contain the word "corpord ompany" or "Co." may not be used in the name.	ation" or "incorporated	I" or the abbreviation "Corp."	or "Inc."
Enter new principal office address, if applicable:			
incipal office address <u>MUST BE A STREET ADDRESS</u>	,) 	C.	20
		<u></u>	9 KC
			~
Enter new mailing address, if applicable:		;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	25
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	 .	 	-0
		<u> </u>	
		T.*,	
			
If amending the registered agent and/or registered off		enter the name of the	
new registered agent and/or the new registered office	address:		
Name of New Registered Agent:			
	(FI	lorida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
w Registered Agent's Signature, if changing Registered	l Agent:	7	
ereby accept the appointment as registered agent. I am for		the obligations of the position.	
, , , , , , , , , , , , , , , , , , , ,	r		
 	Signature of New Regist	tered Agent, if changing	<u>.</u>

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	<u>V <u>Mi</u></u>	in <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1)Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u></u>		
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
				,
			<u></u>	
	. <u>.</u>			
		<u> </u>		
				
	-		<u> </u>	
	. <u>-</u>			
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	November 15, 2019	
he date of each amend	Iment(s) adoption:	, if other than the
ate this document was s	igned.	
ffective date <u>if applica</u>	ıble:	
	(no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this date will not e on the Department of State's records.	ot be listed as the
doption of Amendme	nt(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 memb adopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
Dated	November 15, 2019	
Signature	Julia Melin	_
(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)	_
	Sherman Melvin	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	