## N18000010734

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(8	Business Entity Name)	
(Document Number)		
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S. YOUNG

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: TOUCH The Words, Inc
DOCUMENT NUMBER: N 18000010734
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Divya Acoca
(Name of Contact Person)
$\mathcal{N} \setminus \mathcal{M}$
(Firm/ Company)
5420 Mica Vista Deive
Palm Harbor FL, 34685
(City/ State and Zip Code)  A VOCO CO A TO GO GOON COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person)  (Name Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee  \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee \\ Certificate of Status \\ (Additional copy is enclosed) \\ (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision 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**

Articles	to s of Incorporation	
TouchTI	Ne Words, Ic	<u> </u>
(Name of Corporation as current	ntly filed with the Florida Dept. of State)	
M180000	19734	
(Document Number	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the f	ollowing
A. If amending name, enter the new name of the corporation	ion:	
MIR		The new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." o	
B. Enter new principal office address, if applicable:	$A \setminus \mathcal{U}$	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	)	
	<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	M/W	19 
		50 ==
		— <del>———</del> [[1]
	(5)	_ <del></del> O
D. If amending the registered agent and/or registered offic	ice address in Florida, enter the name of the	ف
new registered agent and/or the new registered office ac		·
Name of New Registered Agent:	NA	<del></del>
New Registered Office Address:	(Florida street address)	
N	· / K	
	(City) , Florida	
New Registered Agent's Signature, if changing Registered .  Thereby accept the appointment as registered agent. I am fan	Agent: miliar with and accept the obligations of the position.	
	NIA	
Si	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.

Example: $\underline{X}$ Change $\underline{X}$ Remove $\underline{X}$ Add	<u>V</u> <u>Mike</u>	Doe e Jones e Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		NIA	
Add			
Remove		MIA	<del> </del>
2) Change		19/14	
Add			
Remove		NIA	
3 ) Change		——————————————————————————————————————	
Add			
Remove			
4) Change		M/K	
Add			
Remove		N	
5) Change	<del></del>	MA	
Add			
Remove			
6) Change		M/A	
Add			<del></del>
Remove		•	

E. If amending or adding additional Articles, enter change(s) here:	
(attach additional sheets, if necessary). (Be specific)	
Article III: The specific	
purpose for which this	
corporation is ocquirzed is:	
to carry out all processes	
necessary and proper in orde	ر
to fuctored literacy acound	
the world, Upon, 20,550lution.	
Touch The Words, Inc shall	
donate all outstanding	
balance to chacitable	
Ocavirations as voted	
in 26 U.S.C section 170.	

•	5/3/19	
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
date this document was signed.	3/11/19	
Effective date <u>if applicable</u> :	3/9///	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this ent of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted was/were sufficient for approval.	I by the members and the number of votes cast for the amend	dment(s)
There are no members or members e adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was	s/were
Dated $\frac{3}{3}$	)/19	
Signature <u> </u>	wordena	
	or vice chairman of the board, president or other officer-if di	
	ected, by an incorporator – if in the hands of a receiver, trust nted fiduciary by that fiduciary)	iee, or
Ac	chara Acoco	7
	(Typed or printed name of person signing)	
Q c	esident-Touc	h The Woods. I
	(Title of person signing)	