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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	EMBRACE CHANGE	CORP.		
DOCUMENT NUMBER:	N18000011001			
The enclosed Articles of Amendment an	d fee are submitted for filing.			
Please return all correspondence concerr	ning this matter to the followin	g:		
	PEDRO G. HE	LD		
	(Name of Conta	ct Person)		
	(Firm/ Com	рапу)		
	6000 SOUTH FLORI	DA AVE. #5532		
-	(Addres	s)		
	LAKELAND.	FL 33813		
	(City/ State and	Zip Code)		_
	held@embracech			
E-mail addres	ss: (to be used for future annua	il report notification	n)	
For further information concerning this i	natter, please call:			
Pedro C	3. Held	787 at	640-9643	
(Name of Co	ontact Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following am	ount made payable to the Flo	rida Department of	State:	
	iling Fee & \$\sum \$\\$43.75 \text{ Filing} \text{Certified Cop} \text{(Additional coenclosed)}	y Certif opy is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

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

EMBRACE CHANGE CORP.

(Name of Corporation as currently filed with the Flor	rida Dep	t. of State)			
	N18000	0011001			
(Document N	Number o	of Corporation	(if known)		
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, t	this <i>Florida N</i> i	ot For Profit Corp	oration ado	pts the following
A. If amending name, enter the new name of the cor	rporation	<u>:</u>			
		N/A			The new
name must be distinguishable and contain the word "con" "Company" or "Co." may not be used in the name.	orporation	i" or "incorpo	orated" or the abb	reviation "C	orp," or "Inc."
B. Enter new principal office address, if applicable:		1516 V	/ILLAGE CENTE	R DR. SUIT	E 104
(Principal office address MUST BE A STREET ADDR		LAKE	LAND, FL 33803		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>	N/A			2020 AFR -6
D. If amending the registered agent and/or registered new registered agent and/or the new registered of			orida, enter the na	me of the	P <u>H</u> 5:
		RO G. HELD			-
Name of New Registered Agent:		 	RIDA AVE. 5532	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:			(Florida street add	ress)	
	LAK	ELAND		, Florida _	33813
		(City)	· · · · · · · · · · · · · · · · · · ·	(Zip Co	de)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. It	am famil	iar with and a	tent		ition.
	Sign	ature of New H	Registered Agent, i	t 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 Do V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	CEO	PEDRO G. HELD	6000 FLORIDA AVE. Suite 5532 LAKELAND, FL 33813
Remove			
2) Change Add	_COO_	ALENE C. SAAP	1516 VILLAGE CENTER DR. 104 LAKELAND, FL 33803
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
N/A			
		•	

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The date of each amondment(s) adaptions	MARCH 3rd, 2020	.e.aia
The date of each amendment(s) adoption: date this document was signed.		, if other than the
uate this document was signed.		
Effective data if!		
Effective date if applicable:	nore than 90 days after amendment file date,	
(no n	nore inan 90 aays ajier amenament file date,	1
Note: If the data incorred in this blank date ====	t most the applicable statute - Clience	manta shia dasa willi aas ba ta ta a d
Note: If the date inserted in this block does not document's effective date on the Department of	i meet me applicable statutory filing requirer	nems, this date will not be listed as the
document's effective date on the Department of	i State 8 records.	
Adoption of Amandment(s) (C1)	IFCK ONE)	
Adoption of Amendment(s) (CH	<u>IECK ONE</u>)	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	MARCH 3rd, 2020
Dated	
	Pulse S. Mills Storile
, .	the chairman or vice chairman of the board, president or other officer-if directors
	we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
Ou	ner court appointed fiduciary by that fiduciary)
OII	PEDRO G. HELD
Oli	
Oli	PEDRO G. HELD

(Title of person signing)