## N18000 012 567

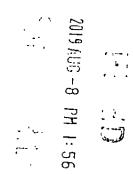
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R. WHITE AUG 1 2 2019

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	EMPOWERED GIRI	LS, INC		
	R18000012567			
DOCUMENT NUMBER: _				
The enclosed Articles of Ame	endment and fee are subm	nitted for filing.		
Please return all corresponde	nce concerning this matte	r to the following:		
FELICIA R LEWIS				
		(Name of Contact P	erson)	
EMPOWERED GIRLS, INC				
		(Firm/ Compan	y)	
P.O. BOX 681102				
		(Address)		
ORLANDO, FLORIDA 328	68-1102			
		(City/ State and Zip	Code)	711
EMPOWERED GIRLS, INC				
Ε-	mail address: (to be used	for future annual re	port notificatio	n)
For further information conce	rning this matter, please	eall:		
FELICIA R LEWIS		ai	407	383-6539
(	Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pay	vable to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & 1 Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certit is Certit	0 Filing Fee Teate of Status Ted Copy Tional Copy is Tosed)
Mailing A			reet Address	

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



EMPOWERED GIRLS, INC		0010 4:10 - Q PM 1:56
(Name of Corporation	as currently filed with the	/::\- <del></del>
N18000012567		
(Docum	ent Number of Corporation	ı (if known)
Pursuant to the provisions of section 617.1006. Flori amendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida N</i>	of For Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
N/A		The ne
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		
B. Enter new principal office address, if applical	N/A	
(Principal office address MUST BE A STREET AI		
	·	<del></del>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	N/A N/A	
	<del></del>	
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered</li> </ol>		orida, enter the name of the
	N/A	
Name of New Registered Agent	••	
		(Florida street address)
New Registered Office Address:		TO PROMISE CONTROL OF THE PROMISE OF
	N/A	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with and a	weept the obligations of the position.
		• • •
_	Signature of New 1	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:  X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	ST	ROSA LEWIS	P.O. BOX 681102
Add			Orlando, Florida 32868-1102
Remove			
2) Change	<u>s</u>	DONNA ENOCH	P.O. Box 681102
Add			Orlando, Florida 32868-1102
X Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)  Removal of Donna Enoch, Secretary			

	date of each amendment(s) adoption: this document was signed.	, if other than the
Effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )	
	The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 8 M 2019	
	(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)	-
	FELICIA R. Lews (Typed or printed name of person signing)	