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APR 10 2013

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Wongen	of Expansion elac.
DOCUMENT NUMBER: NIGOO	0001284
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	he following:
Tecovia Ca	lvin
(Nan	ne of Contact Person)
Women of	Expansion (Firm/Company)
4510 N L	) niversity DR (Address)
Lauderhill (City.	FC State and Zip Code)
Women of expansi E-mail address: (Id be used for fi	on @ qmail.com
For further information concerning this matter, please call:	nute annue continue annue.
Tecovia Calvin	at (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	to the Florida Department of State:
(Ac	3.75 Filing Fee & S52.50 Filing Fee rtified Copy Certificate of Status dditional copy is Certified Copy closed) (Additional Copy is Enclosed)
Mailing Address	Street 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

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Art	of	2010 100
11 James Ot Ex	masian T	- 2019 APR - 1 P & 12
(Name of Corporation as cur	rently filed with the Flori	ida Dept. of State) 33 S S S
N19000	001286	MCCANASSEL, FLORIDA
	umber of Corporation (if ke	nown) .
Pursuant to the provisions of section 617.1006, Florida Stannendment(s) to its Articles of Incorporation:	atutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration <u>:</u>	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the <u>name</u> .	oration or incorporated	or the abbreviation Corp. or the.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u> )	
		· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered offi</li> </ol>		enter the name of the
	<u></u>	
Name of New Registered Agent:		. · <u>- · · · · - </u> · - <del>- · · · · · · · · · · · · · · · · </del>
	(F)	orida street address)
New Registered Office Address:	[- 10	y an si cei dan cary
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent;	
hereby accept the appointment as registered agent. I ar		the obligations of the position.
	Signature of New Registr	ared locat if changing
	SOUTH OF BUILDING REGISTA	ereo navni ii chinvino

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 I V Mike . SV Sally S	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Traasurer	andriene Robb	4510 N University DR Lauderhill , FL 33351
Remove 2) Change Add	President	Mary Brown Russell	4510 N University Dr. Lauderhill, FL 35351
Remove 3) Change Add Remove	<u>Secretary</u>	Francina Hill Hay	4510 N University Dre Lauderhill, Fr. 33351
4) Change Add Remove			
5) Change			
Remove 6) Change Add			
Remove			

(attach additional sheets, if necessary	Articles, enter chan v). (Be specific)				
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The date of each amendment(s) adoption:date this document was signed.	02	01	2019	, if other than the
Effective date if applicable:	03	احوا	12019	
(no mor			amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of Sta		ble sta	itutory filing requirement	s, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)			
The amendment(s) was/were adopted by the n was/were sufficient for approval.	nembers and th	ie nur	nber of votes cast for the	amendment(s)
☐ There are no members or members entitled to adopted by the board of directors.	vote on the an	nendn	nent(s). The amendment(	(s) was/were
Dated 03 18 201	9		_	
Signature (By the chairman or vice ch				
have not been selected, by other court appointed fiduc	•			r, trustee, or
			zvin	
	(Typed or pri	nted n	name of person signing)	
	proctor			
	(1	itle of	f person signing)	