N19000003731

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:			<u> </u>
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
JUSTINA P ROYSTER			
	(Name of Contact Per	son)	
	(Firm/ Company)		
279 SHAY TRAIL			
	(Address)		
CANTONMENT, FL 32533			
	(City/ State and Zip C	ode)	
esquaredine19@gmail.com			
E-mail address: (to be used	I for future annual repo	ort notification)
For further information concerning this matter, please	eall:		
JUSTINA P ROYSTER	at _	850	516-9085
(Name of Contact Person	1)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida D	epartment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations	Ame	et Address endment Secti ision of Corpo	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

E2 INC		
(Name of Corporation as currently filed with the Florida D	ept. of State)	
N19000003731		
(Document Number	er of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:	
N/A		_The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS))	26
C. Enter new mailing address, if applicable:	N/A	Į.
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office	ce address in Florida	, enter the name of the
new registered agent and/or the new registered office a	daress.	
Name of New Registered Agent:		
New Registered Office Address:	(f	lorida street address)
Hen Registered Office Hangsay.		271
	(City)	, Florida (Zip Code)
	(0,)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	Agent: miliar with and accep	t the obligations of the position.
		
Si	enature of New Regis	tered 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	PT John Do V Mike Jo SV Sally Sr	ones .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>×</u> Change Add	<u>T</u>	NEAL CROOM	2849 CARRINGTON LAKES CANTONMENT, FL 32533
Remove 2) × Change	S	JERMAINE TART	8587 UNTREINER ROAD
Add	<u>~</u>		PENSACOLA, FL 32534
Remove 3) Remove Add Remove		N/A	
4) Change Add		<u>N/A</u>	
Remove			
5) Change Add		N/A	
Remove			
6) Change Add		N/A	
Remove			
E. If amending or additional shee		icles, enter change(s) here: (Be specific)	
Amendment to: Currently	/ Neal Croom is li	sted as a (Director) and Jermaine Tart is lister	d as a (Director). There is a change,
Neal Croom is named (Tr	reasurer), Jermain	e Tart is named (Secretary). Both should be n	oted as a change.
			
Amendment Article III to	: This corporation	dorganization is organized exclusively for ch	aritable, educational purposes within
the meaning of section 50)1(e)(3). The orga	nization will engage in activities permissible	under section 501(c)(3) including:

to educate individuals in the community on financial literacy and group life skills.	
Please delete old Article III: TO EDUCATE INDIVIUALS IN THE COMMUNITY ON	FINANCIAL LITERACY,
TO PROVIDE GROUP LIFE SKILL SESSIONS AND TO PROVIDE SERVICES THA	T EMPOWER THE
PARTICIPANTS ENTREPRENEURIAL ASPIRATIONS.	
The date of each amendment(s) adoption:	, if other than the
10-9-2020	
(no more than 90 days after amendment file d	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	irements, this date will not be listed as the

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

(<u>CHECK ONE</u>)

Adoption of Amendment(s)

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
(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)
(JUSTINA P ROYSTER
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)