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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	id Incorporated		
N19000004107 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
Loretha Cleveland			
	(Name of Contact Perso	n)	
Florida's Truth Be Told Incorporated			
	(Firm/ Company)		
4060 40th Circle South			
	(Address)		
St. Petersburg, FL 33711			
	(City/ State and Zip Coc	le)	
lcleveland5@gmail.com			
E-mail address: (to be used	for future annual report	notification	1)
For further information concerning this matter, please of	call:		
Loretha Cleveland		?7	
(Name of Contact Person)	(A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	rable to the Florida Dep	artment of	State:
\$\B\$ \$35 Filing Fee \B\$43.75 Filing Fee & I Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address Appendment Section		Address	
Amendment Section	Amen	amont Sect	ryn

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



(Name of Corporation as currently filed with the Florida Deptsof State) Floridas Truth Be Told Incorporated - N19000004107 (Document Number of Corporation (if known) SECRETARY OF STATE Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Florida's Truth Be Told Incorporated name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc.' "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Chango			
6) Change	-		
Add			· · · · · · · · · · · · · · · · · · ·
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
The purpose is to educate Children and
Seniors about true Stories involving
911 Floridians, providing insight and
understanding of those who were
underprivileged, to advance knowledge
and universitanding. 16 Promote diversity
and inclusiveness Within the Community? among all races, religions and ethnic
actions and elling

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 7/30/2019 (nd more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast 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 7-25-2019	
Dated 7-25-2019 Signature Outha R. Olweland	
(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)	
Loretha R. Cleveland	
(Typed or printed name of person signing)	
President	

(Title of person signing)