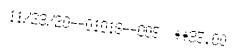
N1900005151

(Requestor's Name)					
(Address)					
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MM 0 9 2021 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SER-KALLAI I NAME OF CORPORATION:			
N19000005151			
DOCUMENT NUMBER:			· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
NATHALIE A CAYCEDO			
	(Name of Contact Per	son)	
	(Firm/ Company)		
2946 W LA SALLE ST			
	(Address)		
PHOENIX, AZ 85041			
	(City/ State and Zip C	ode)	
fcodecker73@gmail.com			
E-mail address: (to be	used for future annual repo	ort notification	1)
For further information concerning this matter, pl	ease call:		
NATHALIE A CAYCEDO		561	635-7250
(Name of Contact Pe			(Daytime Telephone Number)
Enclosed is a check for the following amount made	de payable to the Florida D	epartment of	State:
■ \$35 Filing Fee	tus Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations	Amo	et Address endment Secti sion of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

SER-KALLALING (Name of Corporation as currently filed with the Florida Dept, of State) N19000005151 (Document Number of Corporation (if known) 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: N/A 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. 2946 W LA SALLE ST B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) PHOENIX, AZ 85041 C. Enter new mailing address, if applicable: 2946 W LA SALLE ST (Mailing address MAY BE A POST OFFICE BOX) PHOENIX, AZ 85041 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: Florida (City) (Zip Code) 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.

Signature of New 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith				
Type of Action (Check One)	Title	Name	Address			
1) Change Add						
Remove						
2) Change Add						
Remove 3) Change Add Remove						
4) Change Add						
Remove						
5) 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)						
Said organization is organ	ized excl	usively for charitable, religious, educational, and scie	ntific			
purposes, including, for such purposes, the making of distributions to organizations that qualify						
as exempt organizations described under Section 501(c)(3) of the Internal Revenue Code, or						
corresponding section of any future federal tax code.						

Upon the dissolution of the organization, assets shall be distributed for one or more e	kempt
purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or	
corresponding section of any future federal tax code, or shall be distributed to the fed	eral
government, or to a state or local government, for a public purpose.	
THESE ARTICLES MUST BE ADDED.	·
NI/A	
The date of each amendment(s) adoption: N/A date this document was signed.	, if other than th
Effective date if applicable:	
(no more than 90 days after amendment fil	date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

3	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 11/17/20 Signature Multiple
	(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)
	NATHALIE A CAYCEDO
	(Typed or printed name of person signing)
	PRESIDENT
	<u> </u>
	(Title of person signing)