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(Reque	estor's Name	*)
(Addre	ss)	
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(City/S	tate/Zip/Pho	ne #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity N	ame)
(Docur	nent Numbe	r)
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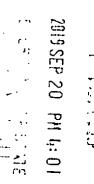


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### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Just Live Free Ente  N:	rprises, Inc			- <del></del>	,
DOCUMENT NUMBER: _	N 1900	000 9 7 5 1		EIN	82-53	86210
The enclosed Articles of Am	endment and fee are subn	nitted for filing.				
Please return all corresponde	nce concerning this matte	r to the following:				
Jackie Ferreiro						
		(Name of Contact Pers	on)	<del>-</del>		
Just Live Free Enterprises	s. Inc					
		(Firm/ Company)				
5649 Bittersweet Drive						
		(Address)				
Holiday, Florida 34690						
		(City/ State and Zip Co	ode)			
E	-mail address: (to be used	for future annual repor	t notification	1)		
For further information cone	erning this matter, please	call:				
Jackie.L.Ferreiro@outloo	k.com	√ 8	313	458-5025		
	(Name of Contact Person)		Area Code)	(Daytime Telep	hone Number)	
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida De	partment of S	State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status		Certifi Certifi	0 Filing Fee icate of Status ied Copy tional Copy is osed)		
P.O. Box 6	nt Section f Corporations	Ame Divis Clifte	et Address indment Secti sion of Corpe on Building Executive C	orations		

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

mber of Corporation (if known) utes, this Florida Not For Profit C  ration:  oration" or "incorporated" or the a	The new
utes, this Florida Not For Profit C  ration:  oration" or "incorporated" or the a	The new
vation: pration" or "incorporated" or the a	The new
oration" or "incorporated" or the a	The new abbreviation "Corp." or "Inc."
N/A	The new abbreviation "Corp." or "Inc."
N/A	ubbreviation "Corp." or "Inc."
N/A	9 SEP 2
ffice address in Florida, enter the	name of the
e addr <u>ess:</u>	
tFlorida street	address)
	, Florida
(City)	, Florida (Zip Code)
ed Agent: familiar with and accept the obliga	ations of the position.
	ffice address in Florida, enter the e address:  (Florida street  (City)

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)	<u>Title</u>	<u>Name</u>		Address
i) Change		N/A		
Add			_	
Remove			-	
2) Change				
Add			_	
Remove			_	-
3 ) Change				
Add			_	
Remove			_	
Total No.			_	
4) Change				
Add				
Remove			_	
- (1)				
5) Change			<del></del>	
Add			_	
Remove			-	
6) Change		_		
Add			_	
Remove			_	

# E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

ARTICLEIII, CORPORATE PURPOSE
Section 1. Nonprofit Purpose
This corporation is organized and operated exclusively for exempt purposes under Section 501(c)(3) of the
Internal Revenue Code and may not carry on activities not permitted to be carried on by an organization described
in Section 501(c)(3).
Upon dissolution of the organization, assets shall be distributed for one or more exempt 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 federal government, or to a state or local government, for a public purpose.
Any such assets not disposed of should be disposed of by a court of competent jurisdiction in the county in
which the principle office of the organization is then located, exclusively for such purposes or to such
organization or organizations, as said Court shall determine, which are organized and operated exclusively
for such purposes.

## E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

## Section 2. Specific Purpose

Just Live Free Enterprises, Inc. provides pre-employment training, on-the-job-training, supported employent
and employment services for persons with special needs, disabilities and at-risk behaviors. This service
specifically works with clients who are re-entering society, either as a Veteran or ex-offender as well as clients
who are disadvantaged physically or mentally, who need assistance in finding and maintaining employment
in the competitive market. This service includes working with the Department of Vocational Rehabilitation to
train, and support clients who are at a disadvantage in finding employment, job placement, securing and
maintaining employment. The Employment specialist works to build lasting relationships with the clients as
well as with the businesses in the community, to fill in the job gaps and get clients into the workforce while
building relationships within the community.
The specific objectives and purpose of this organization shall be:
a. to provide pre-employment instruction in preparation for entering the workforce, such as basic skills
needed to go to work, grooming habits, how to interview, and expectations for finding. / keeping a job to
persons with special needs, disabilities and or at-risk behaviors:
b. to provide supported employment to clients who need assistance learning a job as well as building
natural supports to facilitate and promote a healthy work environment for both the client and the employer;
c. to provide employment services for clients who just need assistance getting back into the
workforce who may need help interviewing and being offered an opportunity for employment;
d. to provide opportunities for clients to prepare, seek, interview and accept employment
as well as have an advisor who will assist in every way possible to get clients ready and
able to accept responsibility, to become employed, get on their feet and just live free.

09/13/2019	
The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
09/13/2019	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date v locument's effective date on the Department of State's records.	vill not be listed as the
Adoption 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 was/were sufficient for approval.	(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.	
09/18/2019 Dated	
Signature Mie Ferriere	
(By the oldsfinan or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Jackie Ferreiro	
(Typed or printed name of person signing)	•
President	
(Title of person signing)	-

EIN 82-5386210