N 190000 12364

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cir	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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R. WHITE
JAN 1 5 2020

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

THE ART OF EMINAME OF CORPORATION:	POWERMENT, INC		
N190012364 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sul	bmitted for filing.		
Please return all correspondence concerning this mal	tter to the following:		
LAUREN COHEN			
	(Name of Contact P	'erson)	<u> </u>
-	(Firm√ Compan	y)	
7050 W Palmetto Park Rd., Suite 15-322			
	(Address)		
BOCA RATON, FL 33433			
	(City/ State and Zip	Code)	
LAURENESQ@GMAIL.COM			
E-mail address: (to be use	d for future annual re	port notification	n)
For further information concerning this matter, pleas	e cali:		
Lauren Cohen	at	(954)	914-3914
(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status		Certifi is Certif	Diffing Fee leate of Status led Copy Lional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ar Di	reet Address mendment Secti vision of Corpo ne Centre of T	rations

2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

2319 ETC 16 PH 4: 56

THE ART OF EMPOWERMENT, INC.

(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
THE ART OF EMPOWERMENT, INC.		
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u>RESS</u>)	
	 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	ÿ	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		, enter the name of the
Name of New Registered Agent:	_	
New Registered Office Address:	(F)	lorida street address)
New Neglistered Office Address.		
	(City)	, Florida (Zip Code)
	•	(My Cont)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. It		the obligations of the position
. nevery accept the appointment as registered agent. The	am jamaiar viin ana accepi	an araganano oj me positirin.
	Signature of New Regist	ered 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	<u>РТ</u> <u>V</u>	John Doe Mike Jones	
X Add Type of Action (Check One)	<u>SV</u> <u>Title</u>	Sally Smith Name	Address
1) Change Add	<u>PD</u>	HINDY STEGMAN	8206 NW 59 St., Tamarac, FL 33
Remove 2) Change			<u></u>
Add Add			
Remove		_	
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
		Page 2 of 4 <u>onal Articles, enter change(s) here</u> : essary). (Be specific)	
	,		

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	Page 3 of 4	
The date of each amendment(s) adoption:date this document was signed.	, i1	f other than the
Effective date if applicable:		
(no more than 9	0 days after amendment file date)	
		layed on the
Mote: If the date inserted in this block does not meet the a document's effective date on the Department of State's rec	pplicable statutory filing requirements, this date will not be learness.	isted as the
Adoption of Amendment(s) (CHECK ONI	E)	

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 12-11-19
Signature (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)
HINDY STEGMAN
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)