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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

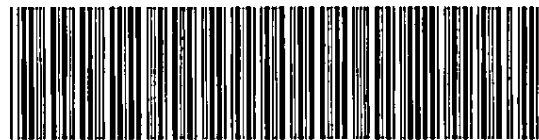
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020
11:00:09

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Restarted Art

OCT 24 2020

I ALBRITTON

COVER LETTER

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

SUBJECT: The Decode Me Corporation
CORPORATE NAME

Enclosed are an original and one (1) copy of the restated articles of incorporation and a check for:

~~\$35.00~~ ☒ \$43.75
Filing Fee Filing Fee
& Certificate of Status

☐ \$43.75 ☒ \$52.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Oshmita Golam
Name (Printed or typed)

11657 NW 47th dr
Address

Coral Springs, FL 33076
City, State & Zip

954-268-7679
Daytime Telephone number

oshmita.golam@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the document.

RESTATED ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S. (Not for Profit)

ARTICLE I NAME

The name of the corporation is: The Decode Me Corporation
The Decode Me Corporation

ARTICLE II RESTATED ARTICLES

The text of the Restated Articles is as follows: aims to encourage and inspire
young girls to expand skills to pursue STEM career
trajectories, through diverse ~~plac~~ events and workshops
involving fun projects, mentorship opportunities, and
~~professional development~~ professional development.

07/22

6:01:09

ARTICLE III OFFICERS AND/OR DIRECTORS (optional)

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>VP</u>	<u>Syntia Hadis</u>	<u>706 North C Street</u>
<input type="checkbox"/> Add			<u>Lake Worth, FL.</u>
<input checked="" type="checkbox"/> Remove			<u>33460 US</u>
2) <input type="checkbox"/> Change	<u>VP</u>	<u>Alicia Reinmund-</u>	<u>2308 Rebel Road</u>
<input checked="" type="checkbox"/> Add		<u>Martinez</u>	<u>Austin, Texas.</u>
<input type="checkbox"/> Remove			<u>78704 US</u>
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Ahna Golam

Address: 11657 NW 47th dr

Coral Springs, FL 33076

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Ahna Golam

Required Signature/Registered Agent

September 7, 2020
Date

ARTICLE VI ARTICLE CONSOLIDATION

These adopted restated articles of incorporation supersede the original articles of incorporation and all amendments to them.

ARTICLE VII REQUIRED ADOPTION INFORMATION

Adoption of Amendment(s) (CHECK ONE)

☒ These restated articles of incorporation contain an amendment to the articles of incorporation which required member approval. The date of adoption of the amendments was August 9, 2020, and the votes cast were sufficient for approval

☐ These restated articles of incorporation were adopted by the board of directors.

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than 90 days after the filing.)

Note: 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.

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Dated: September 7, 2020

Signature: *Ohmita Galam*

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee or other court appointed fiduciary by that fiduciary)

Ohmita Galam
(Typed or printed name of person signing)

President
(Title of person signing)