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2020 NCY -3 711 9x 09

DEC 1: 2020

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TRANSCENDING NAME OF CORPORATION:	BEYOND LIMITS INC			
N20000003307				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub-	nitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
JUAWANA L MONTGOMERY				
	(Name of Contact Person	on)		
TRANSCENDING BEYOND LIMITS INC.				
	(Firm/ Company)			
5473 TIMBERLEAF BLVD APT. 1008				
	(Address)			
0RLANDO FLORIDA, 32811				
	(City/ State and Zip Co	de)		
TRANSCENDORLANDO@GMAIL.COM				
E-mail address: (to be used	for future annual repor	t notification	1)	
For further information concerning this matter, please	call:			
JUAWANA L. MONTGOMERY	6. at	89	222-1538	
(Name of Contact Person		(Area Code	(Daytime Telephone Number)	
Enclosed is a check for the following amount made pa	yable to the Florida De	partment of	State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	Diffing Fee icate of Status ied Copy tional Copy is ised)	
Mailing Address Amendment Section	Amen	t Address idment Secti		
Division of Corporations	Divisi	ion of Corpo	rations	

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

TRANSCENDING BEYONLIMITS	INC.
--------------------------	------

Name of Corporation as currently filed with the Florida	Dept. of State)		
N20000003307			
(Document Nun	nber of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profi	it Corporation adopts the	following
A. If amending name, enter the new name of the corpor	ation:		
			The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name	ration" or "incorporated" or th	ne abbreviation "Corp." o	r "Inc."
B. Enter new principal office address, if applicable:			<u></u>
Principal office address <u>MUST BE A STREET ADDRES.</u>	<u>S</u>)		
	-		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	P.O BOX 618661		
	ORLANDO FLORIDA 32861		
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		the name of the	2020 HDY -3
	audress:		8
Name of New Registered Agent	·,		1
	(Florida str		
New Registered Office Address:	(r wriaa sir	eei aaaress)	33
		Florida	<u>ී</u> ලි
	(City)	, Florida (Zip Code)	- ত
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f		ligations of the position.	
 :	Signature of New Registered Ag	gent, 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	PT John De V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>P</u>	JAMES F. BROCKINGTON	P.O BOX 2022 DELAND, FL. 32721
Remove			
2) X Change Add	<u>VP</u>	JUAWANA L. MONTGOMERY	5473 TIMBERLEAF BLVD APT. 1008 ORLAND FL. 32811
* Remove 3) Change Add Remove	VP	HEMLER MAURICETTE	5237 LANETTE ST ORLANDO FL. 32811
4) Change X Add	SEC/TR	JAQUILA S. LAW	2133 SAN JOSE BLVD ORLANDO, FL. 32808
Remove			*****
5) Change Add			
Remove			<u></u>
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Arti	icles, enter change(s) here: (Be specific)	

<u></u>	

<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.

1	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Signature Signature (Dy 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)
	JUAWANA L. MONTGOMERY
	(Typed or printed name of person signing)
	VICE PRESIDNT
	(Title of person signing)