N20000003716

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(Ac	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	R AN ORPHAN INC				
N20000003716 DOCUMENT NUMBER:		-			
The enclosed Articles of Amendment and fe	e are submitted for filin	ıg.			
Please return all correspondence concerning	this matter to the follow	wing:			
SAMIRA SATTAR					
	(Name of Co	ntact Person)	<u>-</u>		
EMPOWER AN ORPHAN INC					
	(Firm/ Co	ompany)			
2663 CARAMBOLA CIRCLE NORTH					
	(Add	ress)			
COCONUT CREEK, FL 33066					
	(City/ State a	nd Zip Code)			
SAMIRA@BMAACCOUNTING.COM					
E-mail address: (to be used for future an	nual report no	tification)	
For further information concerning this matt	er, please call:				
SAMIRA SATTAR		954 at		224 4060	
(Name of Conta	ict Person)	(Area	(Code	(Daytime Telephone Number	er)
Enclosed is a check for the following amour	nt made payable to the I	Florida Depar	tment of	State:	
☐ \$35 Filing Fee ■\$43.75 Filin Certificate o		Гору	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street A Amendm Division The Cer	ent Secti of Corpo		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

EMPOWER AN ORPHAN INC

(Name of Corporation as currently filed with the Flo N20000003716	orida Dept. of State)	
	Number of Corporation (if known	n)
Pursuant to the provisions of section 617.1006. Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Pr	ofit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
NOT APPLICABLE		The new
name must be distinguishable and contain the word "co" (Company" or "Co." may not be used in the name.	orporation" or "incorporated" or	the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	NOT APPLICABLE	
(Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	NOT APPLICABLE	
D. If amending the registered agent and/or register		er the name of the
new registered agent and/or the new registered of		
Name of New Registered Agent:	OT APPLICABLE	
		N ·
New Registered Office Address:	(Floride	street address)
	(City)	(Žip Code
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		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	PT John D V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		NOT APPLICABLE	
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 addi (attach additional she	ng additional Art ets, if necessary).	ticles, enter change(s) here: (Be specific)	
CHANGES IN ARTICL	ES III: THE SPE	CIFIC PURPOSE FOR WHICH THIS CORP	ORATION IS ORGANIZED IS:
FROM THE FOLLOWI	NG SPECIFIC PU	JRPOSE :	
"TO EMPOWER ORPH	ANS FROM ARC	OUND THE WORLD AND HELP THEM FI	ND FAMILIES "
CHANGE TO THE FOI	LOWING SPEC	IFIC PURPOSE :	
"TO EMPOWER ORPH	IANS FROM ARG	OUND THE WORLD AND HELP THEM FI	ND FAMILIES AND

HELP THE NEEDY WITH FOOD, SHELTER AND CLOTHING ALL	OVER THE WORLD."
	
<u> </u>	
OCT 21, 2021	
The date of each amendment(s) adoption: OCT 21, 2021 date this document was signed.	, if other than the
OCT 21, 2021	
Effective date if applicable: (no more than 90 days after an	nendment file date)
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the numb was/were sufficient for approval.	per of votes cast for the amendment(s)

Dated	
ignatur	
	(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)
	SAMIRA SATTAR
	SAMIRA SATTAR (Typed or printed name of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.