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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Raw Image N	Von-Profit Community	Service Inc.			
N20000006560 DOCUMENT NUMBER:					
	1 2014 51 611			•	
The enclosed Articles of Amendment and fee a	are submitted for filing	? .			
Please return all correspondence concerning th	is matter to the follow	ing:			
Soul Ali					
	(Name of Con	tact Person)			
Raw Image Non-Profit Community Service In	ıc.				
	(Firm/ Co	mpany)			
4532 Croton Drive					
	(Addr	ess)			
New Port Richey, FL 34652					
	(City/ State an	d Zip Code)	_		
soulali823@gmail.com					
E-mail address: (to	be used for future ann	ual report not	ification)	
For further information concerning this matter	, please call:			·	
Soul Ali		352 at		451-2785	
(Name of Contact	Person)	(Area	Code)	(Daytime Telephone Numb	er)
Enclosed is a check for the following amount	made payable to the Fi	lorida Departr	nent of !	State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of		ру	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 Ad Amendmo Division o The Cent	nt Secti of Corpo		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Raw Image Non-Profit Community Service Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N20000006560 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 4532 Croton Drive B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) New Port Richey, FL 34652 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: 4532 Croton Drive (Florida street address) New Registered Office Address: New Port Richey , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the 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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) X Change Add	Р	_	Soul Ali	4532 Croton Drive New Port Richey, FL 34652
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 addin (attach additional shee			icles, enter change(s) here: (Be specific)	
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The date of each amendment(s) add date this document was signed.	option:	, if other than the
Effective date if applicable:		
Energy date in applicable.	(no more than 90 days after amendment file date)	
	ck does not meet the applicable statutory filing requirements, this date will r	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).	

1	There are no mem adopted by the box	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	Dated	February 5, 2021
	Signature	5.00 D
	(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)
		Soul Ali
		(Typed or printed name of person signing)
		President
		(Title of person signing)