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2022 JUL 25 AM 9:35

!- !! !-!! 2022 JUL 25 AM 9: 5 SECRETARY OF STA

COVER LETTER

TO: Amendment Section **Division of Corporations**

The Promis NAME OF CORPORATION:	sed Child Corporation	,	
N20000007033			
The enclosed Articles of Amendment and fe	e are submitted for filing	· ·	
Please return all correspondence concerning	this matter to the follow	ing:	
Karissa Williams			
	(Name of Cont	act Person)	
The Promised Child Corporation			
	(Firm/ Cor	npany)	
27615 U.S. HWY 27, STE 109, #314			
	(Addre	ess)	
Leesburg, FL. 34748			
	(City/ State and	d Zip Code)	
info@thepromisedchild.org			
E-mail address: (to be used for future annu	ual report notificati	on)
For further information concerning this matt	er, please call:		
Karissa Williams		352 at	792-0650
(Name of Conta	ct Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoun	t made payable to the Flo	orida Department o	of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate o		py Cert copy is Cert (Add	50 Filing Fee ificate of Status ified Copy ditional Copy is losed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

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

FILED

The Promised Child Corporation 2022 JUL 25 AM 9: 59 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE ALLAHASSEE, FLOOR N20000007033 (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: The Promised Child Inc. 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: (Florida street address) New Registered Office Address: N/A , 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	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check Onc)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	CEO/P	Karissa Williams	27615 U.S. HWY 27 STE 109. # 314
Remove			LEESBURG, FL. 34748
2) Change Add	<u>S</u>	Wanda Mack	27615 U.S. HWY 27 STE 109, # 314
Remove 3)	<u>T</u>	Nadine Gourdet	LEESBURG, FL. 34748 27615 U.S. HWY 27 STE 109, # 314 LEESBURG, FL. 34748
4) Change Add		N/A	
Remove			
5) Change Add		<u>N/A</u>	
Remove			
6) Change Add		N/A	
Remove			
E. If amending or addin (attach additional shee	g additional Articles, if necessary).	cles, enter change(s) here: (Be specific)	
N/A			
	· · · · · · · · · · · · · · · · · · ·		
			<u> </u>

Effective date <u>if applicable</u> :		han 90 days afte	r amendment file a	late)		
The date of each amendment late this document was signed	t(s) adoption: 7/24/22 N/A		 		, if other the	han the
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	- <u>.</u>					
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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.

)	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 Signature Massa M
	(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)
	Karissa Williams
	(Typed or printed name of person signing)
	CEO/PRESIDENT
	(Title of person signing)