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Requestor's Name)		
Address)		
Address)		
(City/State/Zip/Phone #)		
☐ WAIT	MAIL	
Business Entity Name	e)	
(Document Number)		
Certificates of	of Status	
Special Instructions to Filing Officer:		
	(Business Entity Name (Document Number) Certificates of	

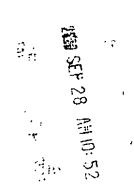
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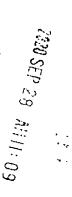


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<u>COVER LETTER</u> ;

TO: Amendment Section Division of Corporations

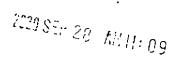
The My My Foundation, Inc. NAME OF CORPORATION:
N20000007705 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
lack E. Kiker, III, Esq.
(Name of Contact Person)
WilliamsGautier Law
(Firm/ Company)
2010 Delta Blvd.
(Address)
Fallahassee, Florida 32303
(City/ State and Zip Code)
ake.Kiker@WilliamsGautier.com
E-mail address: (to be used for future annual report notification)
for further information concerning this matter, please call:
ack E. Kiker, III 850 386-3300
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
inclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section

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

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



The My My Foundation, Inc.

(Name of Corporation as currently filed with the Fl. N20000007705	orida Dept. of State)	
	Number of Corporation (if kn	own)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	- Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		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: (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
D. If amending the registered agent and/or register		enter the name of the
new registered agent and/or the new registered of	office_address:	
Name of New Registered Agent:		
New Registered Office Address:	(Flo	rida street address)
		Florida
	(Ciţy)	(Zip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept t	he obligations of the position.
	Signature of New Registe	red Agant if changing

and address of each (Attach additional shee Please note the officer P = President; V = Vic	Officer and/o ets, if necessa /director title re President; O = Chief Fir	or Director being added: (17) (18) by the first letter of the office tit T= Treasurer; S= Secretary; D= (18) bancial Officer. If an officer/dire	time of each officer/director being removed and title, name, le: Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief, ector holds more than one title, list the first letter of each office
Changes should be not a change, Mike Jones Mike Jones, V as Rema	leaves the coi	rporation, Sally Smith is named t	Doe is listed as the PST and Mike Jones is listed as the V. There is he V and S. These should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add Remove	СЕО	Kamaiu Johnson	914 Railroad Avenue Tallahassee, FL 32310
2) Change Add	<u>COO</u>	Ramon Alexander	914 Railroad Avenue Tallahassee, FL 32310
Remove 3) Remove Add Remove			
4) Change Add		-	
Remove 5) Change Add			
Remove 6) Change			
Add Remove			
		nal Articles, enter change(s) he sary). (Be specific)	<u>re</u> :

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The date of each amendment(s) addate this document was signed.	doption:	_, if other than the
Effective date <u>if applicable</u> :		
ancesire oute it appricating.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Do	ock does not meet the applicable statutory filing requirements, this date will not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amount of the control of the con	dental heater mank mand at a suit of the second of the sec	
was/were sufficient for approv	dopted by the members and the number of votes east for the amendment(s) al.	

	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	09/21/20	200 SEP 28 AMT 1:09		
	Signature		·		
(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)					
		Kamaiu Johnson			
		(Typed or printed r	name of person signing)		
		CEO/Executive Director			

(Title of person signing)