## N2000000 8493

(F	Requestor's Name)	
<u> </u>	address)	
(A	address)	
(C	City/State/Zip/Phone #)	·
PICK-UP	WAIT	MAIL
(E	Business Entity Name)	
([	Occument Number)	
Certified Copies	Certificates of	Status
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J. FASON JUL 02 2021

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Global Success Univ				
	N20000008493				
DOCUMENT NUMBER:					<u>-</u> _
The enclosed Articles of Am	endment and fee are sub	mitted for filing.			
Please return all corresponde	ence concerning this matt	er to the following:			
Linda Wittman					
		(Name of Contact)	Person)		_
Global Success University I	nc				
		(Firm/ Compa	ıy)		•
1849 Ohio Ave NE					
		(Address)			
St Petersburg, FL 33703					
		(City/ State and Zij	Code)		
Linda@hgml.nct					
	-mail address: (to be use	d for future annual r	eport notification	on)	
For further information con-	cerning this matter, please	e call:			
Linda Wittman			727 nt	422-7326	
	(Name of Contact Persor		(Area Code)	(Daytime Telephone	Number)
Enclosed is a check for the	Collowing amount made p	ayable to the Florid	Department o	f State:	
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certi is Certi	50 Filing Fee ficate of Status fied Copy itional Copy is	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Enclosed)

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)  N20000008493  (Document Number of Corporation (if known)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the foramendment(s) to its Articles of Incorporation:	llowing
A. If amending name, enter the new name of the corporation:	
	he new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Company" or "Co." may not be used in the name.	"Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<del></del>
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>
1	
	<del></del>
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: LINPA WITTMAN	
1849 OHIO AUE NE (Florida street address)	
New Registered Office Address:	
ST. PETERS BURG Florida 337 (City) (Zip Code)	03
(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	

and address of each Officer/diagram (Attach additional sheets, Please note the officer/diagram) P = President: V = Vice F	cer and/ if necess ector title resident; Chief Fi	or Direct ary) e by the fi T= Treas inancial C	or being added: irst letter of the office title: surer; S= Secretary; D= Director; Th Officer. If an officer/director holds me	R= Trust	ee; C = Chairman or Clerk; CEO = Chief one title, list the first letter of each office
Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	ves the co	rporation	i, <u>Sally Smith is named the V and S. T</u>	is the PS These sho	T and Mike Jones is listed as the V. There is ould be noted as John Doe, PT as a Change,
Example: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) Change Add		_		_	
Remove 2) Change Add		<del>-</del>		<u>-</u>	
Remove 3 ) Remove		_	<u>.                                    </u>	_	
4) Change Add		_		_	
Remove					
5) Change Add		_		_	
Remove 6) Change Add		_		_	
Remove					
E. If amending or additional sheet			cles, enter change(s) here: (Be specific)		
ARTICLE IX Said organization is orga	nized exc	lusively f	for charitable, religious, educational,	and scier	ntific purpose, including, for such

purposes, the making of distributions to preanizations that qualify as exempt organizations under Section 501 (c)(3) of the

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of

Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future feeral tax code, or shall be

Internal Revenue Code, or corresponding sections of any future federal tax code.

distributed to the fereral government, or to a			
		· · · · · · · · · · · · · · · · · · ·	<u>.</u>
			<u>-</u>
			<u>-</u>
-			
The date of each amendment(s) adoption:	May 27, 2021		if other than the
date this document was signed.			
Effective date if applicable:		···	
	o more than 90 days after ameno		
Note: 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 Departmen	t 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.

	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	5/27/2021
Signature	(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)
	Linda Wittman
	(Typed or printed name of person signing)
	Vice President
	lopted by the bo  Dated  Signature

(Title of person signing)