

N20 0000 11785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

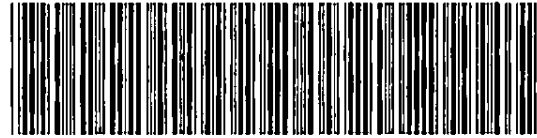
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

Time
Ex.
File
Amend.



500358113275

01/15/21--01015--015 **43.75

FILED

2021 APR 12 PM 4:43

SECRETARY OF STATE
TALLAHASSEE, FL

Amend

JUL 0 - 2021

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Sharon Mail, INC

DOCUMENT NUMBER: N 200000 11785

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JARED Postal
(Name of Contact Person)

Sharon Mail, INC D.B.A. About Commynounity
(Firm/ Company)

1201 NW 14th Street
(Address)

Boca Raton, Florida 33486
(City/ State and Zip Code)

Jared@aboutcommynounity.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jared Postal at 954-654-5386
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|--|---|---|--|

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

FILED
2021 APR 12 PM 4:43
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2021 APR 12 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FL

February 25, 2021

JARED POSTAL
1201 NW 14TH STREET
BOCA RATON, FL 33486

SUBJECT: SHARON MAIL, INC.
Ref. Number: N20000011785

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction must be filed within 30 days of the date that the original document was filed.

In order to file the changes requested, please complete the Amendment form (enclosed).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore
Regulatory Specialist II

Letter Number: 221A00004236

Can I also change the owner information on Fictitious Name "About Commynunity" to its original owner Sharon Mail, INC. This is our 501C3, Mr. Goldberg and Jared Postal are not the owners of About Commynunity, Sharon Mail, INC is, and was of Sharon's Dreams prior to changing to About Commynunity. This was a clerical error.

*
Please see
enclosed documentation

www.sunbiz.org

SORRY
JARED POSTAL

Articles of Amendment
to
Articles of Incorporation
of

FILED
2021 APR 12 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FL

(Name of Corporation as currently filed with the Florida Dept. of State)

Sharon Mail, Inc

N 20000011785

(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 new 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.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1201 NW 14th St.

Boca Raton, Fla 33486

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1201 NW 14th St.

Boca Raton, Fla 33486

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:

JARED Postal

1201 NW 14th St. Boca Raton

(Florida street address)

New Registered Office Address:

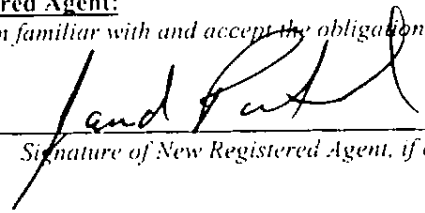
Boca Raton

(City)

Florida 33486
(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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Jared Postal</u>	<u>1201 NW 14th St.</u> <u>Boca Raton, Fla 33486</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Ira Goldberg</u>	<u>10457 Laurel Rd.</u> <u>Davie, Fla 33328</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

F. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Fictitious name For Sharon Mail, inc was Sharon's Dreams,
and has been changed to "About Community" registration
number is G21000007570. Please see Division of Corporations
acceptance of this change dated Jan 19, 2021. ~~Sharon's Dreams~~
Enclosed !!

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: JAN 1, 2021
(no more than 90 days after amendment file date)

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 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 3/10/21

Signature Jared Postal
(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)

JARED POSTAL
(Typed or printed name of person signing)

Executive Director
(Title of person signing)