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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:MINDF	TULLY HEA	LING EXPRESSING RELEASING INC.	20M
DOCUMENT NUMBER: N 20000		<u> </u>	_
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this matt	ter to the following:		
TARVEHALE SAUN	DERS		
	(Name of Contact Perso	n)	
MIND'S EYE DAY S	(Firm/ Company)		
4855 NW 57th CO	DURT		
	(Address)		
TAMARAC FL 3331	(City/ State and Zip Cod	le)	
MINDFULLYHER @ G	MAIL · Co	notification)	
For further information concerning this matter, please	call:		
TARVEHALE SAUNDER (Name of Contact Person	at (A	954 - 240 - 9047 rea Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made pa	ayable to the Florida Dep	artment of State:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section		Address Iment 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

FILED

MINDFULLY HEALING EX	PRESSING	AND REPERSENTS:	ess
(Name of Corporation as currently filed with the	Florida Dept. of State)		
Name		SEGRETARY OF STA	ΞE
N0000013930		interpretation production in the second produc	
(Docum	ent Number of Corporation	ı (if known)	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida N</i>	ot For Profit Corporation adopts the follo	wing
A. If amending name, enter the new name of the	corporation:		
			new
name must be distinguishable and contain the word	"corporation" or "incorpo	orated" or the abbreviation "Corp." or "I	nc. "
"Company" or "Co." may not be used in the name.			
B. Enter new principal office address, if applicable	ale:		
(Principal office address MUST BE A STREET AL	DDRESS)		
-	,		
	 -		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	(OX)		
			
	<u> </u>		
D. If amending the registered agent and/or regist	ered office address in Flo	rida, enter the name of the	
new registered agent and/or the new registered	d office address:	-	
Name of New Registered Agent:			
wante of their negistered rigerit.			
_			
Nova Projetova 1000 v 411		(Florida sireet address)	
New Registered Office Address:			
		, Florida	
-	(City)	(Zip Code)	
N. 15	• •		
New Registered Agent's Signature, if changing Re	gistered Agent:		
I hereby accept the appointment as registered agent.	i am familiar with and ac	cept the obligations of the position.	
	Signature of New R	egistered 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 <math>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: XChange X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	_\	ELIZABETH BROOKS	1393 THE 12th FAIRWAY WELLINGTON, FL 3341
2) Change Add	<u> </u>	DEBURAH ESTRADA	8341 SANPS POINT BI
Remove Change Add Remove	_5_	ESTHER SWABY	TAMARAC FL 33321 559 PALM ST Mc KEESPORT, PA 15132
4) Khange Add		JOB BRUNAT	1953 SW 15th STREET
Remove 5) Change Add	PT	TARVEHALE SAUNDERS	PEERFIELD, FL 3344 4855 NW 57th Ct TAMARAC FL 33319
Remove 6) Change Add Remove			
	ig additional Arti	<u>cles, enter change(s) here</u> ; (Be specific)	

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That was a south of
The date of each amendment(s) adoption: October 25th, 2022, if other than the
and this document was signed.
Effective date if applicable: October 25th 2022
Income that the contract of th
(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
	Signature Jaruhale Saunders (By the chairman or vice chairman of the house
	(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)
	TARVEHALE SAUNDERS (Typed or printed name of person signing)

(Title of person signing)

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