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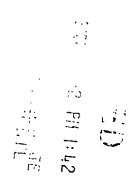
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COVER LETTER

TO: Amendment Section Division of Corporations

y * .

NAME OF CORPORATIO		YOUTH EMPOWE	RMENT CENT	ΓER INC.	
DOCUMENT NUMBER: _	N2100000	1611			
The enclosed <i>Articles of Ame</i>					
Please return all corresponden	ice concerning this matt	er to the following:			
НОГ	NNY OXYDE				
		(Name of Contact F	Person)		
		(r: /G			
		(Firm/ Compar	ıy)		
8461 LAKE WORTH ROAD	SUITE# 135				
		(Address)			
LAKE WORTH, FL					
		(City/ State and Zip	Code)		
johnnyoxyde@changeoneyou	thempowermentcenter.	com			
E-1	mail address: (to be used	for future annual re	port notification	n)	
For further information conce	rning this matter, please	e call:			
JOHNNY OXYDE		а		603-5922	
(1	Name of Contact Persor	n)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the fo	llowing amount made p	ayable to the Florida	Department of	State:	
₩ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fed Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee ficate of Status fied Copy tional Copy is fied)	
Mailing Ad	ldress	S	treet Address		

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

CHANGE ONE YOUTH EMPOWERMENT CENTER INC.

(Name of Corporation as currently filed with the Florida	Dept. of State)	.,		
N21000001611				
(Document Numb	per of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corpo</i>	ration adopts th	e follo	owing
A. If amending name, enter the new name of the corporat	tion:			
			The	new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbre	viation "Corp."	or "I	nc."
B. Enter new principal office address, if applicable:	8461 LAKE WORTH RD SUITE#	135		
(Principal office address MUST BE A STREET ADDRESS) LAKE WORTH, FL			
	33467			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8461 LAKE WORTH RD SUITE#	135	- <u></u>	_ _ _
	LAKE WORTH, FL		•	
	33467		<u>-</u>	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		ne of the	PHI	7
Name of New Registered Agent:			<u>:-</u>	
8461 LAI	KE WORTH RD SUITE# 135	L:;	10	
New Registered Office Address:	(Florida street addres	is)	•	
LAKE W	ORTH	Florida 33467		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		of the position.		
S	ignature of New Registered Agent, if c	hanging		

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	<u>ones</u>	
Type of Action (Check One)	Title	Name	Address
1) Change Add	<u>VP</u>	DAVID DORINVIL	5048 LANTANA RD #5101 LAKE WORTH, FL 33463
× Remove			
2) Change Add	<u>T</u>	MARIE VINCENT	5727 LICOLN CIR E LAKE WORTH, FL 33463
Remove 3) × Change Add Remove	<u>VP</u>	TIFFANY WHITE	4070 KEY LIME BLVD BOYNTON BEACH, FL 33436
4) Change Add			
Remove			
5) Change Add	***	•	
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
			<u> </u>
			

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The date of each amendment(s) adoption: date this document was signed.	06/26/2021				, if c	ther than the
Effective date if applicable: 06/26/2021						
(n	o more than 90	days after amen	dment file da	te)		
Note: If the date inserted in this block does	not meet the app	olicable statutor	y filing requir	ements, this da	ate will not be list	ed as the

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.

	06/26/2021
Dated	
Cianatur	
Signatur	(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)
	JOHNNY OXYDE
	(Typed or printed name of person signing)
	(c) The section of th