N2100000 2570

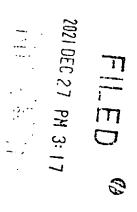
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C. BRUMBLEY JAN - 3 2022

COVER LETTER

TO: Amendment Section Division of Corporations

Promise Childre NAME OF CORPORATION:	en, Inc	2021 207 31 31 14
N21000002570 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
Yahmyia Banks		
	(Name of Contact Persor	n)
Promise Children		
	(Firm/ Company)	
5379 Lyons Rd #1652		
	(Address)	
Coconut Creek, FL 33073		
	(City/ State and Zip Code	e)
yahmyiab48@gn:ail.com		
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, ple	ease call:	
Yahmyia Banks	(95 at	4)397361 7
(Name of Contact Per	rson) (Ar	ea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount mad	le payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of State		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section		Address ment 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

į,

Promise Children, INC		
(Name of Corporation as currently filed with the Flor	rida Dept. of State)	
N21000002570		
(Document N	Number of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:	
Y&Y Foundation, INC		The new
name must be distinguishable and contain the word "cor "Company" or "Co," may not be used in the name.	poration" or "incorporated	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	. 20
		2
C. Enter new mailing address, if applicable:		27
(Mailing address MAY BE A POST OFFICE BOX)		27 PH
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent:		
		orida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I describe the appointment of the least of	tered Agent: am familiar with and accept i	the obligations of the position.
	Signature of New Registe	red 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: XChange X Remove X Add	<u>v</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add	·		
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add		·	
Remove			·
E. If amending or addin (attach additional shee		nal Articles, enter change(s) here: sary). (Be specific)	
			<u> </u>
			

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	-
	.
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after	amendment file date)
Note: If the date inserted in this block does not meet the applicable st	atutory filing requirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

document's effective date on the Department of State's records.

Adoption of Amendment(s)

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 Dated Dated Date Date
(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)
(Typed or printed name of person signing)
President
(Title of person signing)