N21000002778

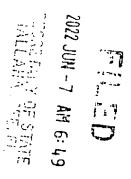
(Re	questor's Name)	
(Ad	dress)	
DA)	dress)	
(Cit	ty/State/Zip/Phone #	f)
PICK-UP	■ WAIT	MAIL
(7)		,
(Bu	isiness Entity Name	÷)
(Do	cument Number)	
Certified Copies	Certificates of	of Status
	_	
Special Instructions to	Filing Officer:	
		ļ

Office Use Only



900388598659

06/07/22--01022--017 **35.00



A. BUTLER
AUG 2 3 2022

COVER LETTER

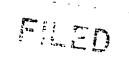
TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: EMPOWERING A	NONYMOUS, INCORPO	RATED	
	JMBER: N21000002978			
The enclosed Artic	cles of Amendment and fee are su	bmitted for filing.		
Please return all co	orrespondence concerning this ma	itter to the following:		
	KELLI MIRR			
		Name of Contact Person	1	
		Firm/ Company		
	2140 North 29th Avenue, #20	06		
		Address		
	Hollywood FL 33020			
		City/ State and Zip Code	٥	
	lovinglife@empoweringchoi	ce.net		
	E-mail address: (to be us	sed for future annual report	notification)	
For further inform	ation concerning this matter, plea	se call:		
KELLI MIRR		at (8956955	
Na	me of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	e □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$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, F1, 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Thank you!

Articles of Amendment to Articles of Incorporation of



EMPOWERING ANONYMOUS, INCORPORATED

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

EMPOWERING ANONYMOUS, INCORPORATED	2022
(Name of Corporation as current	tly filed with the Florida Dept. of StateAH 6: 49
N21000002978	2.7.2.7.7.
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
EMPOWERING CHOICE, INCORPORATED	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered." "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida si	treet address)
New Registered Office Address:	, Florida
	(in one)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
t nereny accept the appointment as registerea agent. I am jamiliar	with and accept the obligations of the position.
	0
Signature of New 1	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.

X Change	<u>PT</u>	John Doc		
X Remove	<u>V</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change			 	
Add				
Remove				
2) Change			_	
Add				
Remove 3) Change			 -	
Add				
Remove			-	
4) Change			 	
Add				
Remove				
5) Change			 	
Add				
Remove				
6) Change				
Add				
Remove				

tach additional.	lding additional Arti sheets, if necessary).	(Be specific)				
						-
				1977		
	- -	 -				_
-					-	
 				. <u> </u>		
						
 -			· · · · · · · · · · · · · · · · · · ·			
	 -					
an amendment	provides for an exch plementing the ame	iange, reclassifi	cation, or cance	<u>Hation of issued</u>	shares,	
	able, indicate N/A)	nument ii not c	ontained in the	amenument itse	<u></u>	
•						
						

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, thi Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	ient(s)
	approved by the shareholders through voting groups. The following sta for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes o	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
sele	a director, president or other officer – if directors or officers have not be cted, by an incorporator – if in the hands of a receiver, trustee, or other officer fiduciary by that fiduciary)	
	VIVIEN LURLENE	
	(Typed or printed name of person signing)	
	SECRETARY TREASURER	
	(Title of person signing)	