N21 00000 4962

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Basiness Ellar, Hame)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

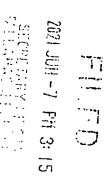
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07/04/2021 JH



COVER LETTER

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations WARRIOR IN ME CORP NAME OF CORPORATION: N21000004962 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LAURA TAYLOR (Name of Contact Person) (Firm/ Company) 5202 JONES AVE (Address) ZELLWOOD, FL 32798 (City/ State and Zip Code) LAURAMTAYLOR19@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 4396823 LAURA M TAYLOR 321 (Daytime Telephone Number) (Name of Contact Person) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ■\$43.75 Filing Fee & Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

Articles of Incorporation 1021 JUN -7 Fil 3: 15

FUED

WARRIOR IN ME CORP		SECRETARY FOR	
(Name of Corporation as currently filed with the	e Florida Dept. of State)	
N21000004962			
(Docum	nent Number of Corpora	tion (if known)	
Pursuant to the provisions of section 617.1006. Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florid</i>	a Not For Profit Corporation adopts the folk	ywing
A. If amending name, enter the new name of the	e corporation:		
N/A		The	e new
name must be distinguishable and contain the word			
"Company" or "Co," may not be used in the name B. Enter new principal office address, if applica	- N/A		
(Principal office address MUST BE A STREET A			
			
			
C. Enter new mailing address, if applicable:	.		
(Mailing address MAY BE A POST OFFICE	BOX)		
			
D. If amending the registered agent and/or regis		Florida, enter the name of the	
new registered agent and/or the new register	N/A		
Name of New Registered Agent:			
	N/A		
New Registered Office Address:		(Florida street address)	
Ten regarezea vyjice Taggess	N/A		
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	Registered Agent: t. I am familiar with an	d accept the obligations of the position	
-	Signature of Ne	w 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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)ChangeAdd	<u>V</u>	AUSTIN J TAYLOR	5202 JONES AVE ZELLWOOD, FL 32798
X Remove			
2) Change Add	<u>DS</u>	STACIE M CLEMENS	615 RYAN AVE APOPKA, FL 32712
Remove 3)	<u>DT</u>	LAURAM TAYLOR	5202 JONES AVE ZELLWOOD, FL 32798
4)Change	<u>D</u>	APRILLE CLIFTON	8685 COVENTRY PARK WAY WINDERMERE, FL 34786
Remove			
5) Change Add	<u>D</u>	JAMES EVANS	217 ALMADEN CT WINTER SPRINGS, FL 32708
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional she		Articles, enter change(s) here: (Be specific)	
ARTICLE III - PURPO	SE		
TO PROVIDE ACTIVI	TIES, ADVENT	TURES, GOODWILL, SUPPORT, AND A S	SENSE OF CONNECTION TO
WARRIORS AND THE	EIR CORE SUP	PORTERS OF CANCER, INSPIRING ALL	TO CONTINUE THE FIGHT AND
PROVIDE EMPOWER	MENT TO REM	MEMBER THAT LIVING IS AS IMPORTA	NT AS FIGHTING. ONE WAY THIS
WILL BE ACHIEVED	IS THROUGH.	A PLATFORM OF TELLING PAST JOUR	NEYS TO PROVIDE HOPE AND

SUPPORTERS TO EMBARK ON	SPONSORED ADVENTURES TO KEEP THE FLAM	IE OF LIFE BURNING.
<u> </u>		
		
		
The date of each amendment(s) a date this document was signed.	Joption: APRIL 27, 2021	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	,
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requires partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for al.	the amendment(s)

There are no members or n adopted by the board of di	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
Dated 4/27/20	21	
Signature (By the c	hairman or vice chairman of the board, president or other officer-if directors	
have no	t been selected, by an incorporator – if in the hands of a receiver, trustee, or our appointed fiduciary by that fiduciary)	
LAURA M TAYLOR		
(Typed or printed name of person signing)		
DIRI	ECTOR/TR	
	(Title of person signing)	