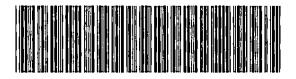
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SEURETARY OF STATE
OF CORPORATIONS
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	O FREEDOM, INC.	<del> </del>	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
Danielle Downer			
	(Name of Contact I	erson)	
Downer Law, P.A.			
	(Firm/ Compar	iy)	
211 East Rich Ave.			
	(Address)		
DeLand, FL 32724			
	(City/ State and Zip	Code)	
danielle@delandlegal.com			
E-mail address: (to be used	for future annual re	port notificatio	n)
For further information concerning this matter, please	call:		
Danielle Downer	ai	386	873-7835
(Name of Contact Person)	···	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida	Department of	State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy in enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ar Di	reet Address mendment Sectivision of Corpo te Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FOUNDATION (Name of Compared to A	15 70	FREEDOM	7, /NC.
(Name of Corporation as currently filed with th	~-		
NA 1000004	ment Number	er of Corporation (if k	oomu)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the	orida Statute	s, this <i>Florida Not Fo</i>	
			_
name must be distinguishable and contain the word "Company" or "Co," may not be used in the nam  B. Enter new principal office address, if applications	£.	ion" or "incorporatea	The new "or the abbreviation "Corp." or "Inc."
(Principal office address MUST BE A STREET A	IDDRESS)	339 East New Yor	k Avenue Deland Florida 32724
		339 East New York	Avenue Deland Florida 32724
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i> )		
D. If amending the registered agent and/or registered agent and/or the new registered	stered offic	e address in Florida.	enter the name of the
Name of New Registered Agent:		NE RUSSELL	
	339 EAST	NEW YORK AVENU	JE
New Registered Office Address:	New Registered Office Address:  (Florida street address)		rida street address)
	DELAND		, Florida <u>32724</u>
		(City)	(Zip Code)
New Registered Agent's Signature, if changing Pal hereby accept the appointment as registered agent	t. I am fam	iliar with and accept t	
<u>ta</u>	Kelle C	nature of New Register	and transit if the sign
	Sign	nature oj ivew Kegistei	ea Agent, ij 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	PT John I V Mike . SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	СООВО	JESSICA WHITE	339 EAST NEW YORK AVE. DELAND, FL 32724
Remove  2) Change	BOD	SHARON BROWN	339 EAST NEW YORK AVENUE DELAND, FL 32724
Remove 3) Change Add Remove	<del></del>		
4) Change Add			
Remove  5) Change     Add     Remove			
6) Change Add			
Remove E. <u>If amending or addin</u> (attach additional shee	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption date this document was signed.	otion:	, if other than the
Effective data if an Hartin		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	does not meet the applicable statutory filing requirements, this date w	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s	)

•

There are no mer adopted by the b	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.
Dated	Jul 19, 2022
Signatur	Kutherine Russell (Jul 19, 2022 09.34 EDT)
J	(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)
	KATHERINE RUSSELL
	(Typed or printed name of person signing)
	CHAIRMAN & EXECUTIVE DIRECTOR
	(Title of person signing)