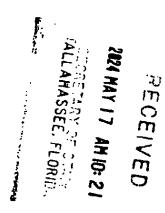
## N21000013841

(Requestor's Name)
•
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filling Officer:
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Office Use Only

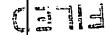


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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: Rising Spear Garn	et Spirit, Inc.	
	MBER: N21000013841		
	les of Amendment and fee are su	bmitted for filing.	
Please return all con	respondence concerning this ma	atter to the following:	
	William Hall		
		Name of Contact Person	n
	Jones Walker LLP		
	~ <del>~~</del>	Firm/ Company	
	106 East College Ave Suite 1	200	
	<del></del> -	Address	
	Tallahassee, FL 32301		
		City/ State and Zip Code	e
	whall@joneswalker.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, plea	se cali:	
William Hall		at ( <sup>850</sup>	)
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 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)
A D P.	Iailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Taliahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Rising Spear Garnet Spirit, Inc.			
(Name of Corporation as currently filed with the Florida	Dept. of State)	<del>_</del>	
N21000013841			
(Document Numb	er 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 Pro</i>	ofit Corporation adopts the foll	owing
A. If amending name, enter the new name of the corporat	ion:		
Garnet Impact, Inc.		TL	
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or	the abbreviation "Corp." or ",	e new Inc."
B. Enter new principal office address, if applicable:	106 East College Ave	<b>20</b>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Suite 1200		-10
	Tallahassec, FL 32301		Cause Ca Ca Ca Ca Ca Ca Ca Ca Ca Ca Ca Ca Ca
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3551 Blairstone Road	<u> </u>	
	Ste 128-277	· #	· · · ·
	Tallahassee, FL 32301	<del>,,, o</del>	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		r the name of the	
Name of New Registered Agent:	<u> </u>		
New Registered Office Address:	(Florida s	street address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	Agent: miliar with and accept the o	bligations of the position.	
<del>-</del> Si	gnature of New Registered A	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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add		-	
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			<del></del> -
E. If amending or addin (attach additional shee	g addition	nal Articles, enter change(s) here: ssary). (Be specific)	
		<del></del>	
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The date of each amendment(s) adoption: date this document was signed.	May 13, 2024	, if other than the
Effective date if applicable:		
(n	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does to document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

Dated	May 17, 2024
Signatur	MAC
-	(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)
	William Cowen
	(Typed or printed name of person signing)
	Chief Executive Officer

. . .