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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	iacle Change Foul	ndation INC.		412-74
DOCUMENT NUMBER:	14558			
The enclosed Articles of Amendment	and fee are subm	nitted for filing.		
Please return all correspondence conc	erning this matter	r to the following:		
David Echavarria				
	((Name of Contact Pe	rson)	
Pinnacle Change Foundation INC.				
		(Firm/ Company)	
491 Ives Dairy RD E306				
		(Address)		
Miami Florida 33179				
	(City/ State and Zip C	Code)	
depouchito@gmail.com				
E-mail add	lress: (to be used	for future annual rep	ort notification	1)
For further information concerning th	is matter, please of	call:		
David Echavarria		at	33179	7547152878
(Name of	f Contact Person)		· · · · · · · · · · · · · · · · ·	(Daytime Telephone Number)
Enclosed is a check for the following	amount made pay	yable to the Florida I	Department of	State:
■ \$35 Filing Fee □\$43.7 Certi	5 Filing Fee & 〔 ficate of Status	U\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Sectio Division of Corpora		Am Div	eet Address endment Sect ision of Corpo	prations
P.O. Box 6327	P.O. Box 6327 The Centre of Tallahassee		allahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED PRIME 24 PM 4: SECREMENTS OF ST

Pinnacle Change Foundation Inc.

Name of Corporation as currently filed with the Florida	Dept. of State)	三次 字
N21000014558		海道 (
(Document Nun	ber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	ntes, this <i>Florida Not F</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor.	ation:	
N/A		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES.	<u>S</u>)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		
D. If amending the registered agent and/or registered of		a, enter the name of the
new registered agent and/or the new registered office	aggress:	
Name of New Registered Agent: N/A	-	
New Registered Office Address:	(4	Florida street address)
The Meganezea Office Plantess.		
	(Citv)	, Florida (Zip Code)
	(City)	(Zip Coae)
New Registered Agent's Signature, if changing Registere		
I hereby accept the appointment as registered agent. I am j	amiliar with and accep	t the obligations of the position.

Signature of New 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 <math>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 Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change Add	<u>o</u>	Ori Ohayon	19490 Ne 23rd Ave Miami, FL 33180 US
Remove 2) Change Add	0	Facundo E Canossa	19770 E County Club Dr Aventura Fl. 33180
Remove 3) Change Add Remove	<u>O</u>	Ashlee Angel	20911 San Simeon Way Apt 102 Miami, Fl. 33179 US
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add Remove			
		cles, enter change(s) here: (Be specific)	
N/A			

The date of each amendment(s) adoption: 5/20/2022 if other than the
The date of each amendment(s) adoption:
Effective date if applicable:
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated	5/20/2022
Signature	Dew Eldon or Na
	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)
	David Echavarria
	(Typed or printed name of person signing)
	Board of Directors

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.