N22 000 000 277

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
- (Ru	siness Entity Name	9)
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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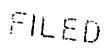
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COVER LETTER

Division of Corporations	• • • • • • • • • • • • • • • • • • • •	
Communication NAME OF CORPORATION:	4 ALL! Inc.	. , ,
N22000000277		
DOCUMENT NUMBER:		···•
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this i	matter to the following:	
Virginia Breen		
	(Name of Contact Person)	-
	(Firm/ Company)	
204 Quayside Circle #502		
	(Address)	•
Maitland, FL 32751		
-	(City/ State and Zip Code)	
vgbreen@gmail.com		
E-mail address: (to be	used for future annual report notification	
For further information concerning this matter, pl	ease call:	
Virginia Breen	973 at	903-5098
(Name of Contact Pe		(Daytime Telephone Number)
Enclosed is a check for the following amount made	de payable to the Florida Department of S	tate:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	tus Certified Copy Certifie (Additional copy is Certifie	Filing Fee sate of Status of Copy onal Copy is ed)
Mailing Address Amendment Section	Street Address Amendment Section	on
Division of Corporations	Division of Corpor	rations
P.O. Box 6327	The Centre of Ta	
Tallahassee, FL 32314	2415 N. Monroe	Succi, Suic 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation



Communication 4 ALL! Inc.	207	22 JAN 28	PM12 to
Name of Corporation as currently filed with the Florida De	pt. of State)	<u> </u>	
N22000000277			F-27-77
(Document Number	of Corporation (if kno	own)	
Pursuant to the provisions of section 617.1006. Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not For	Profit Corpord	ation adopts the following
A. If amending name, enter the new name of the corporatio	<u>n:</u>		
Communication 4 ALL Inc.			The new
name must he distinguishable and contain the word "corporatio" (Company or "Co." may not be used in the name.	on" or "incorporated"	or the abbrev	
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
 -			
If amending the registered agent and/or registered office	address in Florida, e	nter the name	of the
new registered agent and/or the new registered office add			
Name of New Registered Agent:			
New Registered Office Address:	(Flor	ida street address)	
		ļ	-lorida
	(City)	, ,	(Zip Code)
New Registered Agent's Signature, if changing Registered A	gent:		
hereby accept the appointment as registered agent. I am fami		ne 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 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	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>D</u>	Grace Moskota	2 Peabody Terrace Apt. 408 Cambridge, MA 02138
Remove			
2) Change Add	D	Sean Coleman	420 John Mahar Highway #305 Braintree, MA 02184
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee.		cles, enter change(s) here: (Be specific)	
	<u> </u>		
			
	_		
	<u>.</u>		

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The date of each amendment(s) ad	option:, if other than the
date this document was signed.	
mee I . ie . ii s i	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament fite date)
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s)

adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	1/23/2022 /Malma D. B
Signature	(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)
	Virginia G. Breen
	(Typed or printed name of person signing)
	Chair of the Board