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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

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The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Drelly Ribs (Name of Contact Person) Mujer 10 Inc (Firm/ Company) 1251 NW 20 Th ST Apt. 628 (Address) Miami FL 33/42 (City/ State and Zip Code) Mujer 10 or gegnall com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Drelly Rios (Name of Contact Person) (Name of Contact Person) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Drelly Rios (Name of Contact Person) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Drelly Rios (Name of Contact Person) (Area Code) (Daytime Telephone Number) (Area Code) (Daytime Telephone Number) (Area Code) (Daytime Telephone Number) (Additional copy is Certificat Copy (Additional Copy is Enclosed) Mailing Address Amendment Section Amendment Section	NAME OF CORPORATION: MID od	s Kids Foundation Inc
Please return all correspondence concerning this matter to the following: Drelly Ribs	DOCUMENT NUMBER: N22000	0001698
Drelly Ribs (Name of Contact Person)	The enclosed Articles of Amendment and fee are sub	mitted for filing.
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Miami FL 33142		(Name of Contact Person)
Miami FL 33142	Mujer	10 Inc
Miami FL 33/42 (City/ State and Zip Code) Mujer 10 or a gamal. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Drelly Rios (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee St. S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is conclosed) Mailing Address Street Address Street Address		(Firm/ Company)
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For further information concerning this matter, please call: Drelly Rios	-	(City/ State and Zip Code)
Drelly Rios at 786 303 6573	Mujer 10 E-mail address: (to be used	org agmail. Com d for future annual report notification)
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Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed) Mailing Address Certified Copy (Additional Copy is Enclosed)		avable to the Florida Department of State:
		Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

MIDA	ds kids Foundation Inc			
(Name of Corporation as currently filed with the Florida E				
Naao	000001492			
(Document Number	er of Corporation (if known)			
	•			
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following			
A. If amending name, enter the new name of the corporati	ion:			
	The new			
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."			
B. Enter new principal office address, if applicable:	1251 NW 20th ST Apt. 628			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami FL 33142			
C. Enter new mailing address, if applicable:	- T			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)				
	Miami FL 33/42			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office as	diducan.			
	^			
	Drelly Rios 5.			
New Registered Office Address:	(Florida street address)			
	Miami , Florida 33142,			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered	Agent:			
I hereby accept the appointment as registered agent. I am fan				
	Or Angel			
	anatura of the Businessed Against if changing			
ડાશ્	gnature of Jew 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>Mike</u>	Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	_P	Rosana Cantillo	6541 5W 143 CT Miami FL 33193
X Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or ad (attach additional si		articles, enter change(s) here:). (Be specific)	

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The date of each amendment(s) adoption	1 •	6/13/20	22		, if other than the
date this document was signed.	- · <u> </u>	3,10,00			, ii ouiệi man me
		1.01-			
Effective date <u>if applicable</u> :	, -	6/13/20	<u>aa </u>		
	(no more than 90	days after amendme	ent file date)		

<u>Note:</u> 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.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.			
Dated 08 22 2022			
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)			
Drelly Rios			
(Typed of printed name of person signing)			
CEO			

(Title of person signing)