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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

MÂTERNA NAME OF CORPORATION:	L MATTERS FAV	ORED			
DOCUMENT NUMBER: N22000004229	-				
The enclosed Articles of Amendment and fee	are submitted for fi	iling.			
Please return all correspondence concerning t	his matter to the fol	lowing:			
Tamara Mackroy					
	(Name of C	Contact Person	1)		
MATERNAL MATTERS FAVORED					
	(Firm/	Company)			
PO Box 414					
	(A	ddress)			
Goldenrod, FL 32733					
	(City/ State	and Zip Code	:)	-	
tam@mmfavored.org					
E-mail address: (to	be used for future a	annual report i	notification	1)	
For further information concerning this matte	r, please call:				
Tamara Mackroy		321 at		895-8112	
(Name of Contac	t Person)	at(Are	ea Code)	(Daytime Telephone	Number)
Enclosed is a check for the following amount	made payable to the	e Florida Depa	rtment of	State:	
☐ \$35 Filing Fee ■\$43.75 Filing Certificate of	Status Certified	Copy nal copy is	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is esed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Sect n of Corpo entre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	Articles of Amendment	
	to Articles of Incorporation	78.
	of	
MATERNAL MATTERS FAVORED.		
Name of Corporation as currently filed with the	Florida Dept. of State)	
N22000004229		
(Docume	ent Number of Corporation (if known	
Pursuant to the provisions of section 617,1006, Flori	da Statutes, this <i>Florida Not For Pre</i>	ofit Corporation adopts the following
amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the	corporation:	
		71
name must be distinguishable and contain the word	"corporation" or "incorporated" or	The new the abbreviation "Corp." or "Inc."
"Company" or "Co," may not be used in the name.	,	2
P. Enter now principal office address if applicab	lo.	
B. Enter new principal office address, if applicab Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u>OX</u>)	
D. If amounting the majorana discount and the second		
 If amending the registered agent and/or regist new registered agent and/or the new registered 		r the name of the
Name of New Registered Agent:		
	(Florida .	street address)
New Registered Office Address:		
		. Florida
_	(City)	Florida (Zip Code)
		·
New Registered Agent's Signature, if changing Re		Elizabeth Color Sel
I hereby accept the appointment as registered agent.	i am jamaiar wun and accept the o	reagations 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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	<u>T</u>	Kristina Schmidt	2898 Red Lion Square Winter Park, FL 32792
2) Change Add	<u>T</u>	LaTosha Simmons	2224 Saw Palmetto Ln, Apt 111 Orlando, FL 32828
Remove 3) X Change Add Remove	D	Edward Banks	9876 Olivia St Jacksonville, FL 32219
4) Change Add	<u>S</u>	Loreatha Simon	229 S. Ridgewood Ave, #305 Daytona Beach, FL 32114
Remove 5) Change	D	Marissa Batie-Collier	1375 Cross Creek Circle, Suite A Tallahassee, FL 32301
Remove 6) Change Add Remove			
	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
		·	

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	June 26, 2022	
The date of each amendment(s) adoption:	: June 26, 2022	_, if other than the
date this document was signed.		
Tiffication date if n=nti - ti		
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)	1
"	womer than 70 days after amenament file date)	
Note: If the date inserted in this block does	not meet the applicable statutory filing requirements, this date will not be	ne listed as the
document's effective date on the Departmen	nt of State's records.	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	

 \blacksquare 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 memb adopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.
Dated <u>-</u> Signature <u>-</u> (F	By the chairman or vice mairman 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)
	Tamara Mackroy
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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