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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| THE MIAMI GI | VING TREE CORP. | · , |
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| | | |
| Please Debit I200 | 000000257 For: 52.50 | |
| Thank you Seth N | Veeley | |
| 1-4-0 | / | |
| | | Art of Inc. File |
| | | LTD Partnership File |
| | | Foreign Corp. File |
| | | L.C. File |
| | | Fictitious Name File |
| | | Trade/Service Mark |
| | | Merger File |
| | | Art, of Amend, File |
| | | RA Resignation |
| | | Dissolution / Withdrawal |
| | | Annual Report / Reinstatement |
| | | Cerl. Copy |
| | | Photo Copy |
| | | Certificate of Good Standing |
| | | Certificate of Status |
| | | Certificate of Fictitious Name |
| | | Corp Record Search |
| , | | Officer Search |
| 1 | | Fictitious Search |
| Signature | | Fictitious Owner Search |
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| _ | | Driving Record |
| Requested by: | | UCC 1 or 3 File |
| | | UCC 11 Search |
| Name | Date Time | UCC 11 Retrieval |
| Walk-In | Will Pick Up | Courier |

COVER LETTER

TO: Amendment Section
Division of Corporations

| The Miami Giving T | ree Corp. | | |
|--|---|--------------------|--|
| N22000006708 DOCUMENT NUMBER: | | | |
| The enclosed Articles of Amendment and see are sub- | mitted for filing. | | |
| Please return all correspondence concerning this matter | er to the following: | | |
| Max Hornstein | | | |
| | (Name of Contact Pe | rson) | |
| The Miami Giving Tree | | | |
| | (Firm/ Company |) | |
| 9800 NE 5th Avenue Road | | | |
| | (Address) | | |
| Miami Shores, FL 33138 | | | |
| | (City/ State and Zip (| Code) | |
| miamigivingtree@gmail.com | | | |
| E-mail address: (to be used | d for future annual rep | ort notification |) |
| For further information concerning this matter, please | : call: | | |
| Max Hornstein | at. | 305 | 216-0118 |
| (Name of Contact Person | at . | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the following amount made p | ayable to the Florida (| Department of | State: |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee a Certified Copy (Additional copy is enclosed) | Certifi Certifi | Filing Fee cate of Status ed Copy ional Copy is sed) |

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

2023 MAR -9 AH 9: 35

Articles of Amendment to Articles of Incorporation of

| The Miami Giving Tree Corp | | |
|--|-------------------------------|--|
| (Name of Corporation as currently filed with the Flo | rida Dept. of State) | |
| N22000006708 | | |
| (Document | Number of Corporation (if k | nown) |
| Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation: | Statutes, this Florida Not Fa | or Profit Corporation adopts the following |
| A. If amending name, enter the new name of the con | rporation: | |
| | | The new |
| name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name. | rporation" or "incorporated | l" or the abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDI | RESS) | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | , | |
| (Mailing address MAY BE A POST OFFICE BOX | | |
| | | |
| | | |
| D. If amending the registered agent and/or registere | d office address in Florida, | enter the name of the |
| new registered agent and/or the new registered of | Mice address: | |
| Name of New Registered Agent: | | |
| | | |
| _ | (Fle | rida street address) |
| New Registered Office Address: | | |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Regis | tered Agent: | |
| hereby accept the appointment as registered agent. 1 | um familiar with and accept i | he obligations of the position. |
| | | |
| | · | |
| | Singature of Many Degiste | red Joseph if changing |

| and address of each Offi (Attach additional sheets, Please note the officer/dir P = Provident: V = Vice P | cer and/or Direc if necessary) rector title by the f resident; T= Trea Chief Financial | first letter of the office title: isurer; S= Secretary; D= Director; TR= Trus Officer. If an officer/director holds more than | : itee; C = Chairman or Clerk; CEO = Chief |
|--|--|---|---|
| Changes should be noted a change, Mike Jones lead Mike Jones, V as Remove, | ves the corporatio | n, Sally Smith is named the V and S. These sh | ST and Mike Jones is listed as the V. There is ould be noted as John Doe. PT as a Change. |
| Example: X.Change X Remove X Add | PT John Do V Mike Jo SV Sally St | ones | |
| Type of Action (Check One) | Title | Name | <u>Address</u> s |
| Change Add | | | |
| Remove 2) Change Add | | | |
| Remove 3) Change Add Remove | | | |
| 4) Change Add | | | |
| Remove 5) Change Add | | | |
| Remove 6) Change Add | | | |
| Remove | g additional Arti ts. if necessary). | cles, enter change(s) here: (Be specific) | |
| Amending to 501c3 | | rt 11 - numbers 6 & 7 (see below) | |

| (Part II-Number 6) This one | anization pursuant to Section 501 (c) (3) has established in these Articles |
|--|--|
| of lacomoration a moultame | ani that no member director officer of bifler invivious associates and |
| the Composition he empower | ared to engage in activities that in themselves are not in turnierance of one |
| or more exempt purposes, or | except as it pertains to activities that are insubstantial in relation to the |
| Corporation, its operations | and purposes, |
| | |
| (Part II-Number 7) It is requ | ired by these Articles of Incorporation that upon dissolution of the |
| Composition the remaining | accete of the Composition shall be used exclusively for account by the composition shall be used exclusively for account by the composition of the composition shall be used exclusively for account of the composition shall be used exclusively for account of the composition shall be used exclusively for account of the composition of the |
| evenut numbers. This Cou | moration chall be and remain in compliance with State iaw, increasing on |
| mandate and/or requirement | nt by the State of Florida that in the event of dissolution the terraining |
| assets of the Corporation b | e used exclusively for section 501 (c) (3) exempt purposes. |
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| - d-t- of each emendment(s) ad | option:, if other than the |
| te this document was signed. | opnos, it ones than the |
| ie this document was signed. | |
| Tective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| ote: If the date inserted in this bloc cument'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. |
| ioption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were ad- was/were sufficient for approval | opted by the members and the number of votes cast for the amendment(s) |
| | |

| Dated | 3/8/2023 |
|----------|--|
| Signatur | May p. |
| - | (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) |
| | Max Hornstein |
| | (Typed or printed name of person signing) |
| | President |
| | |