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### **COVER LETTER**

TO: Amendment Section  Division of Corporations						
•	TING THEM UP CORPORATION					
DOCUMENT NUMBER:	N22000008965					
The enclosed Articles of Amendment and fee are subn	nitted for filing.					
Please return all correspondence concerning this matte	Please return all correspondence concerning this matter to the following:					
	DYLAN FINGER					
	(Name of Contact Person)					
LIFTING	S THEM UP FOUNDATION INC					
	(Firm/ Company)					
720	0 NE 62ND ST, APT 305					
	(Address)					
	MIAMI, FL, 33138					
	(City/ State and Zip Code)					
DYLAN@LIFTINGTHEMUP.ORG						
E-mail address: (to be used	for future annual report notification)					
For further information concerning this matter, please	call:					
DYLAN FINGER	at ( 754 ) 264-3096					
(Name of Contact Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount made pay	yable to the Florida Department of State:					
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$  □\$43.75 Filing Fee & □ Certificate of Status Certified Copy (Additional Copy is Enclosed)					
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					

## Articles of Amendment to

### Articles of Incorporation

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#### LIFTING THEM UP CORPORATION

N22000008965		
(Document Number of Co		
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporat	tion adopts the follow
A. If amending name, enter the new name of the corporation LIFTING THEM UP F		The n
name must be distinguishable and contain the word "corporat" Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbrevia	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
<ol> <li>If amending the registered agent and/or registered office new registered agent and/or the new registered office a</li> </ol>		of the
Name of New Registered Agent:	N/A	
	N/A	
New Registered Office Address:	(Florida street address)	
	N/A , Florida	N/A
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fai		f the position.
Signature of New	Registered Agent, if changing	

Page 1 of 4

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.

$\frac{X}{X}$ Remove $\frac{X}{X}$ Add	PT         John D           V         Mike J           SV         Sally S		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove		N/A	N/A
2) Change Add			
Remove 3) Change Add	<del></del>		
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)
	N/A
-	
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	e date of each amendment(s) adoption:	, if	other than the
	ective date if applicable:		
	(no more than 90 days after amendment file date)		
Ade	option of Amendment(s) ( <u>CHECK ONE</u> )		
	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 SEPTEMBER 6, 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)	77.	2022
	DYLAN S FINGER	::	SET I
	(Typed or printed name of person signing)	: <u>.</u>	8
	PRESIDENT		=
	(Title of person signing)		9. 1