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(F	Requestor's Name)	
(/	Address)	
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(0	City/State/Zip/Phone #)	_
PICK-UP	☐ WAIT	MAIL
3)	Business Entity Name)	
(i	Document Number)	_
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	
	J. HORNE	
	OCT 18 2022	
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2022 OCT 18 PN 1:35

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COVER LETTER

Division of Corporations

NAME OF CORPORATION: LUCRH: Ve Thoughts Vocational Training, TNC

DOCUMENT NUMBER: N 22 00 000 99 86

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person)

LUCRATIVE Thoughts Vocational Training Inc

(Firm/ Company)

(SOI Arlington Express way B105

(Address)

Jacksonville Florida 32211

(City/ State and Zip Code)

Dennis & Lucrative thoughts, net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dennis H. 1 at 904 - 444-4115

(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

TO: Amendment Section

Street Address
Amendment Section
Division of Corporations

The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

EI	
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_ Lucrative Thoughts Noc	Advoid TRAINING 7	COC 2022 UCT 18 Ph 1: 33
(Name of Corporation as currently filed with the Fl	orida Dept. of State)	SECRETARY OF 1.1.
N2200	0009986	SECRETARY OF 11. FALLAHASSEELE
(Document	Number of Corporation (if know	n)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:		ofit Corporation adopts the following
A. If amending name, enter the new name of the co	erporation:	
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated" of	The new rethe abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO.</u>	<u>X</u>)	
D. If amending the registered agent and/or register new registered agent and/or the new registered of		er the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida	street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.		obligations of the position.
	Signature of New Registered	Agent, if changing

 $(^{\bullet}_{\mathbb{Z}})$

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, Sully 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>	<u>Name</u>	<u>Addres</u> s
1) Change Add	sec	Latresa Henderson	Jan fl 32209
Remove 2) Change Add	SEC	Zendre Williams	S600 Benedict Road JAN FI 32691
X Remove 3) Change Add Remove	TREA	Essence SAPP	9439 CYPTESS Ridge COUPT JAN FIA 32219
4) Change Add	TREP	Danielle Stafford	2070 MORE house Rd
Remove 5) Change Add	VP	Alto E Dennis	6501 Arlinsta Expy D163 JAX F1 32211
Remove 6) Change Add	VY	Alto Daniels	6501 Arlinston 6784 B 163 3AX FL 32211
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	<u> </u>

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		 .
The date of each amendment(s) adopted date this document was signed.	on:	, if other than the
Effective date if applicable:		
and in application.	(no more than 90 days after amendment file date)	
	pes not meet the applicable statutory filing requirements, this date will not b	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes east for the amendment(s)	

Da	ted 10-18-2022
Sig	mature Denni Z NO
•	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Dennis Hill
	(Typed or printed name of person signing)
	Founder
	(Title of person signing)

 \square There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were