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TQ: Amendment Section Division of Corporations

Toussaint I NAME OF CORPORATION:	L'Overture foundation for Arts and Education, Inc.
N22000011320	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fo	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Larry Williams	
	(Name of Contact Person)
	(Firm/ Company)
3916 Rose Petal Lane	
	(Address)
Orlando, FL 32808	
 	(City/ State and Zip Code)
williamslarry1688@yahoo.com	
E-mail address: ((to be used for future annual report notification)
For further information concerning this mat	ter, please call:
Larry Williams	407 535-0278
(Name of Conta	act Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount	nt made payable to the Florida Department of State:
\$35 Filing Fee \$\$43.75 Filing Certificate of	rig Fee & S43.75 Filing Fee & S52.50 Filing Fee of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address

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 to Articles of Incorporation of

	_
(Name of Corporation as currently filed with the Florida Dept. of State)	5: (
N22000011320	
(Document Number of Corporation (if known)	···.
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the followamendment(s) to its Articles of Incorporation:	ving
A. If amending name, enter the new name of the corporation:	
Toussaint L'Ouverture Foundation for Arts and Education, Inc.	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc "Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent: N/A	
(Florida street address)	
New Registered Office Address:	
N/A, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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	<u>v</u>	ohn Doe Mike Jones Bally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>N/A</u>		
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng addition ets, if neces	nal Articles, enter change(s) here: sary). (Be specific)	
N/A			

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The date of each amendment(s) ac date this document was signed.	loption: 10.06.2022	, if other than the
10-0	6-2022	
Effective date if applicable:	(no more than 90 days after amendment file	date)
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing req partment of State's records.	uirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

poard, president or other officer-if directors r – if in the hands of a receiver, trustee, or duciary)
r - if in the hands of a receiver, trustee, or
r - if in the hands of a receiver, trustee, or
ted name of person signing)