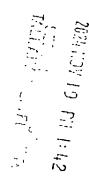


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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	TTER ODDS CORP
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
GIANCARLO MESSINA	
	(Name of Contact Person)
GIVING BETTER ODDS CORP	
	(Firm/ Company)
3170 CORAL WAY UNIT 1608	
	(Address)
MIAMI, FL 33145	
	(City/ State and Zip Code)
giancarlo@messinamadridlaw.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
GIANCARLO MESSINA	917 225 - 6827
(Name of Contact	
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:
☐ \$35 Filing Fee	· · · · · · · · · · · · · · · · · · ·
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

GIVING BEFTER ODDS CORP

(Name of Corporation as currently filed with the Flori	da Dept. of State)	
N22000014353		
(Document N	umber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
N/A		The new
name must be distinguishable and contain the word "corp" (Company" or "Co." may not be used in the name.	ooration" or "incorporated"	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRI	ESS)	202! 7.4.
		· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	·	
		.; 1/3
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 off		
Name of New Registered Agent: N/A		
	(Flo	rıda street address)
New Registered Office Address:		
	<u></u>	, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:	
I hereby accept the appointment as registered agent. I a	m familiar with and accept t	he obligations of the position.
	Signature of New Registe	red 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change Add	P	(iiancarlo Messina	3170 Coral Way, Unit 1608 Mianu FL 33145
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 addin (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	
ARTICLE III			
GIVING BETTER ODDS is organi	zed exclusiv	vely for chantable purposes only, the making of distributions to orga	inizations that qualify as exempt organizations under
section 501(c)(3) of the Internal Revenue Code, or co	responding section	ne of any staure federal tox code. The specific purpose to which this corporation is organized is GIVING U	NEAVORABLE ANDUR UNPROPITIOUS CHILDREN A FAIR CHANCE IN LIFE
ARTICLE VIII			

The effective date for this corporation shall be 12/27/2022. Upon the desolution of the organization, assets shall be distributed for one or more exampt purposes within the meaning of section 501(c)(C) of the Internal Per

or corresponding section of any future federal tax coo	de, or shall be distributed to the federal government, or to a state or local government, for a pu	blic purposes.
Any such assets not disposed or shall be disposed of	t by the Court of common pleas of the county in which the principal office of the organization is	then located,
exclusively for such purposes or to such organization or o	organizations, as said Court shall determine, which are organized and operated exclusively for such p	irposes.
		<u>. </u>
		·
		
		
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		 .
		
	NOVEMBER 7, 2024	
The date of each amendment(s) adoption date this document was signed.	NOVEMBER 7, 2024	_, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not lent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	

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

	11/07/2024
Dated	
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)
	GIANCARLO MESSINA
	(Typed or printed name of person signing)