N2300002486

(Requestor's Name)
(Address)
(1.001030)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special management to 1 ming officer.





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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, Fl. 32314

NAME OF CORPO	RATION: Preserving You	r Bloom, Inc.		_		
DOCUMENT NUM	BER: <u>N23000002486</u>			_		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	atter to the following:				
	Joseph Southron					
		Name of Contact Pers	 50 1 1			
	Four Rivers Law Firm					
		Firm/ Company				
	400 N. Ashley Drive, STE 1	720				
		Address				
	Tampa, FL 33602					
	City/ State and Zip Code				2	
	joe@fourriverslaw.com			-33 -33	2023 NOV - I	
	E-mail address: (to be u	sed for future annual report i	notification)	111	γO	etre.
For further information	on concerning this matter, plea	se call:		2		duit.
	5			7	=	j'in
Joseph Southron		813 at (331-5056	11.	ÀH II: 4	-
Name	of Contact Person	Area Cod	le & Daytime Telephone No	umbe r :	ō	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	rtment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	2852,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
An	niling Address nendment Section vision of Corporations	Amendi	Address ment Section n of Corporations			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Preserving Your Bloom, INC. (Name of Corporation as currently filed with the Florida December 2)	ent of State)	-	
·	ept. or State		
N23000002486	20 2 (6)		
(Document Number	r of Corporation (if k	(nown)	
Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this <i>Florida Not F</i>	or Profit Corporation adopts the f	following
A. If amending name, enter the new name of the corporation	on:		
			The new
name must be distinguishable and contain the word "corporati	on" or "incorporate	d" or the abbreviation "Corp." o	
"Company" or "Co." may not be used in the name.	·	• • •	~>
n r		40	023
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		- (T)	
			 =
		<u> </u>	;
•		် ကိုလ	a
C. Enter new mailing address, if applicable:		•	= !
(Mailing address MAY BE A POST OFFICE BOX)		~. . .;	40
	<u>. </u>	<u></u>	0
		• • • • • • • • • • • • • • • • • • •	-
D. If amending the registered agent and/or registered offic	<u>e address in Florida</u>	a, enter the name of the	
new registered agent and/or the new registered office ac	igress.		
Name of New Registered Agent:			
	_		
	(1	Florida street address)	
New Registered Office Address:			
		, Florida (Zip Code)	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accep	ot the obligations of the position.	
· Sis	enature of New Regi	stered 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add				
Remove				
2) Change Add				
Remove 3) Change Add Remove				
4) Change Add				
Remove 5) Change Add				
Remove 6) Change Add				
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
Article III: Purpose				
The Corporation is organ	nized to p	romote social welfare within the meaning 501(c)(3) of the Internal Revenue Code, or the	
corresponding section of	any futu	re federal tax code, including but not limited to: (1) to educate, inspire, and support people	
of all ages to use their ta	lents and	resources to be the best version of themselves and	(2) give individuals the necessary tools	
to foster a sense of conne	ection, en	gagement and to instill confidence.		

Article VI: Limitations (Remove in its ent	irety)	
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The date of each amendment(s) adoptio date this document was signed.	n: <u>02/17/2023</u>	if other than the
Effective date <u>if applicable</u> : 02/17/202		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not ent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

There are no membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment(s) was/were aird of directors.
Dated	10/10/2023
Signature	Dris Ruth Castor
	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)
	Iris Pastor
	(Typed or printed name of person signing)
	Director
	(Title of person signing)