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2024 DEC 16 ARIONAL SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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NAME OF CORPORATION: Manifesting EX	cellence for Girls & Guys Assor.
DOCUMENT NUMBER: N230000071	10
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the followin	Ř:
Shawn Mincy (Name Contact	et Person)
MEGGA (Firm/ Com	pany)
14864 SW 4840 Ave	
OCMA, FL 34473 (City/ State and	
Shawn Mincy@yahoo E-mail address: (to be used for future annua	· CO ( )  Treport notification)
For further information concerning this matter, please call:	
Shawn Minay (Name of Comact Person)	at 350 - 445 - 3539 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flor	ida Department of State:
\$35 Filing Fee	Fee & 山\$52.50 Filing Fee アンドー Certificate of Status アファー
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address 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

Manifesting Excellence f	or Girls & Buys Association
(Name of Corporation & currently filed with the Flor	rida Dept. of State)
N23000C	Jumber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp  Manifesting Excellence for name must be distinguishable and contain the word "corp  "Company" or "Co." may not be used in the name.	GUYS & GIVIS ASSOCIATION The new poration "or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.	ESS)
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered new registered agent and/or the new registered off  Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)  (City)  (Florida street address)  (City)  (Zin Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	tered Agent: um familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing TORE TORE TO THE COLUMN T

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	PT John Doe  V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change Add		
Remove		
2) Change Add		
Remove 3 ) Change Add Remove		
4) Change Add		SECONE TO SECOND
Remove	•	
5) Change Add		
Remove		
6) Change Add		(7)
Remove		
	ng additional Articles, enter change(s) here: ets. if necessary). (Be specific)	
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The date of each amendment(s) adoption: date this document was signed.	if other than the
17/6/2021	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	listed as the

<u>Note:</u> If the date inserted in this block does not meet the applicable sta document's effective date on the Department of State's records.

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.

ď	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 1252024	
	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)	
	(Typed or printed name of person signing)	
	Chairman (Title of person signing)	



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