## Na3000015160

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Candy's Cause Inc.			
N23000015160 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sul	bmitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
Chandra McKinney			
	(Name of Contact Pe	erson)	
	(Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
4466 Walden Circle	(rim/ Company	<i>(</i> )	
4466 Walden Circle	(Address)		
	(Address)		
Lake Worth, FL 33463			
	(City/ State and Zip	Code)	
candyscauses@gmail.com			
E-mail address: (to be use	ed for future annual rep	ort notificatio	n)
For further information concerning this matter, pleas	se call:		
Chandra McKinney	at	561	523-6973
(Name of Contact Perso		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	_	Certif s Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Di	reet Address nendment Sect vision of Corpore Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

FILED

Candy's Cause Inc.		2024 MAR 19 PM 4: 34
Name of Corporation as currently filed with the Florida I	Dept. of State)	
N23000015160		f AMELIKATAN
(Document Numb	er of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not F</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
N/A		The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	ion" or "incorporate	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	<u> </u>
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 a new registered agent and/or the new registered office a		a, enter the name of the
Name of New Registered Agent:		
New_Registered Office Address:	(	Florida street address)
		70.14
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent:	, ,
	gnature 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 Do Mike Jo Sally Sn	nes es	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change Add		_	N/A	
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			icles, enter change(s) here: (Be specific)	
ADD PROVISION:				
Upon the dissolution of the	nis organ	ization, a	ssets shall be distributed for one or more exen	pt purposes within the
meaning of IRC Section	501(c)(3)	, or corre	sponding section of any future federal tax cod	e, or shall be distributed to
the federal government, o	or to a sta	te or loca	l government, for a public purpose.	

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	03/09/2024	
The date of each amendment(s) adoption:	03/09/2024	, if other than the
date this document was signed.		
Effective date if applicable:		
(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does r document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes east for the amendment(s)	

man of the board, president or other officer-if directors incorporator – if in the hands of a receiver, trustee, or ry by that fiduciary)
incorporator - if in the hands of a receiver, trustee, or
incorporator - if in the hands of a receiver, trustee, or
yped or printed name of person signing)

(Title of person signing)

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