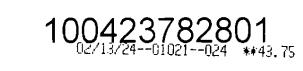
## Na4000000 346

| (Requ                       | estor's Name)  |                   |
|-----------------------------|----------------|-------------------|
| (Addre                      | ess)           |                   |
| (Addre                      | ess)           |                   |
| (City/S                     | State/Zip/Phon | e #)              |
| PICK-UP                     | ☐ WAIT         | MAIL              |
| (Busin                      | ess Entity Nar | me)               |
|                             |                |                   |
| (Docu                       | ment Number)   |                   |
| Certified Copies            | Certificate    | s of Status       |
| Special Instructions to Fil | ing Officer:   |                   |
|                             | J. I<br>MAR    | HORNE<br>- 1 2024 |
| <del></del>                 |                |                   |

Office Use Only







## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Profit Corporation pursuant to section 607.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- > If amending/adding officers/directors, list titles and addresses for each officer/director.
- If amending from a general corporation to a professional corporation, the purpose (specific nature of business) must be amended or added if not contained in the articles of incorporation.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

Pursuant to section 607.0123. Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information you may call the Amendment Section at (850) 245-6050

CR2E011 (1/20)

## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: GIRL BE GREAT   | , INC.   |   |
|-------------------------|---|--|---|
|                         | BER: N24000000346   |  |   |
|                         | of Amendment and fee are su   | bmitted for filing.  |   |
| Please return all corre | spondence concerning this ma  | tter to the following:   |   |
|                         | JACQUELINE EDOUARD  |  |   |
|                         |   | Name of Contact Person   | 1   |
|                         |   | Firm/ Company  |   |
|                         | 1693 GLENHAVEN CIRCL  | •  |   |
|                         |   | Address  |   |
|                         | OCOEE, FL 34761   | 0: 10 16: 0.1  |   |
|                         |   | City/ State and Zip Cod  | e   |
|                         | GIRLBEGREATINC@GMA  |  |   |
|                         | E-mail address: (to be us   | sed for future annual report                                     | notification)   |
| For further information | on concerning this matter, pleas  | se call:   |   |
| JACQUELINE EDO          | UARD  | at (   | 956-2557  |
| Name of Contact Person  |   | Агеа Со  | de & Daytime Telephone Number   |
| Enclosed is a check fo  | or the following amount made  | payable to the Florida Dep                                       | artment of State:   |
| S35 Filing Fee          | ■\$43.75 Filing Fee & Certificate of Status                                       | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)                      |
| Am<br>Div<br>P,O        | iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314 | Amend<br>Divisio<br>The C<br>2415 ì                              | Address Iment Section In of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 |

## Articles of Amendment to Articles of Incorporation of



GIRL BE GREAT, INC.

| OIRL BE OREAT, INC.  | <del>-</del>  |
|--|---|
| (Name of Corporation as curren   | ntly filed with the Florida Dept. of State)   |
| N2400000346  |   |
| (Document Number   | r of Corporation (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, the ts Articles of Incorporation:  | is Florida Profit Corporation adopts the following amendment(s)                       |
| A. If amending name, enter the new name of the corporation:  |   |
|  | ant.  |
| name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A | A professional corporation name must contain the word                                 |
| 3. Enter new principal office address, if applicable:  | 1317 EDGEWATER DRIVE #2186  |
| Principal office address MUST BE A STREET ADDRESS )  | ORLANDO, FL 32804   |
|  | •   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 1317 EDGEWATER DRIVE #2186  |
| · · · · · · · · · · · · · · · · · · ·  | ORLANDO, FL 32804   |
| If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addresses.  |   |
| IACOUELINE EDOLLA  |   |
| Name of New Registered Agent 1317 EDGEWATER DR   |   |
| <del></del>  | street address)   |
| ORLANDO  | 7780.1  |
| New Registered Office Address: ONEANDO   | Florida   |
|  | (City) (Zip Code)   |
| New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familia.   | nt: r with and accept the obligations of the position.  Registered Agent, if changing |

Check if applicable

 $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S. 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:                      | C. Mill Da   | in the contract     |                         |
|-------------------------------|--------------|---------------------|-------------------------|
| X Change                      | <u>PT</u>    | John Doe            |                         |
| $\underline{X}$ Remove        | Y            | Mike Jones          |                         |
| <u>X</u> Add                  | <u>sv</u>    | Sally Smith         |                         |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>         | <u>Addres</u> s         |
| 1) X Change                   | P            | JACQUELINE EDOUARD  | 1317 EDGEWATER DR #2186 |
| Add                           |              |                     | ORLANDO, FL 32804       |
| Remove                        |              |                     |                         |
| 2) X Change                   | D            | JACQUELINE BENJAMIN | 1317 EDGEWATER DR #2186 |
| Add                           |              |                     | ORLANDO, FL 32804       |
| Remove 3) X Change            | D            | ZAKIA HAUGHTON      | 1317 EDGEWATER DR #2186 |
| Add                           |              |                     | ORLANDO, FL 32804       |
| Remove                        |              |                     |                         |
| 4) X Change                   | D            | BENELDA EDOUARD     | 1317 EDGEWATER DR #2186 |
| Add                           |              |                     | ORLANDO, FL 32804       |
| Remove                        |              |                     |                         |
| 5) Change                     |              | _                   |                         |
| Add                           |              |                     |                         |
| Remove                        |              |                     |                         |
| 6) Change                     |              |                     |                         |
| Add                           |              |                     |                         |
| Remove                        |              |                     |                         |

| If amending or adding additional Arti (Attach additional sheets, if necessary). | (Be specific)   |
|---|---|
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| If an amendment provides for an exch  | ange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A)   | ndment if not contained in the amendment itself:          |
| 'A  |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   | <u> </u>  |

|  | adoption:, if other than  |
|--|---|
| date this document was signed.                                     | 2/07/2024   |
| Effective date <u>if applicable</u> :                              |   |
|  | (no more than 90 days after amendment file date)  |
| Note: If the date inserted in thi document's effective date on the | s block does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.  |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )  |
| The amendment(s) was/were action was not required.                 | adopted by the incorporators, or board of directors without shareholder action and shareholder  |
| ☐ The amendment(s) was/were a by the shareholders was/were         | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.   |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes ca  | ast for the amendment(s) was/were sufficient for approval   |
| by   | ·"  |
| , -,   | (voting group)  |
| 02/07/20<br>Dated  | 24  |
| selec  | director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary) |
|  | JACQUELINE EDOUARD  |
|  | (Typed or printed name of person signing)   |
|  | PRESIDENT   |
|  | (Title of person signing)   |