## N24000000657

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Empower Youth I	Foundation Inc.
N24000000657	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Alfredo Ruiz	
	(Name of Contact Person)
	(Firm/ Company)
426 Sycamore Spring St.	
	(Address)
Debary, FL 32713	
	(City/ State and Zip Code)
Freddy@empoweryouth.foundation	
E-mail address: (to be u	ised for future annual report notification)
For further information concerning this matter, plea	ase call:
Alfredo Ruiz	407 666-0070
(Name of Contact Pers	
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
M \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Statu	
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 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 of

Empower Youth Foundation Inc.		
(Name of Corporation as currently filed with the I	Florida Dept. of State)	
(Documen	nt Number of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida No</i>	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the c	orporation:	
The new me must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co," may not be used in the name.		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	2x 424 < DeB	Sycamore Springs St.
D. If amending the registered agent and/or registence new registered agent and/or the new registered		rida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and ac	cept the obligations of the position.
•	Signature of New R	egistered 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 Si	ones	HIA
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		_	<del></del>	
4) Change Add		_		
Remove				
5) Change Add		_		
Remove				
6) Change Add		<del>-</del>		
Remove				
E. <u>If amending or additional sheet</u>			icles, enter change(s) here: (Be specific)	
AMEND ARTICLE III				1
SAID CORPORATION	IS ORGA	NIZED	UNDER THE NONPROFIT PUBLIC BENE	FIT CORPORATION LAW
EXCLUSIVELY FOR C	HARITA	BLE, RE	ELIGIOUS, EDUCATIONAL, AND SCIEN	TIFIC PURPOSES AND IS NOT
ORGANIZED FOR THI	EPRIV	A <u>TE GA</u>	IN OF ANY PERSON, EXCEPT THAT TH	E CORPORATION SHALL BE
AUTHORIZED AND E	MPOWE	RED TO	PAY REASONABLE COMPENSATION F	OR SERVICES RENDERED AND

TO MAKE PAYMENTS AND DIS	TRIBUTIONS IN FURTHERANCE OF THE PUR	POSES SET FORTH HERE W
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		,
		·
		; -
The date of each amendment(s) ad	option:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file do	
	(no more than 90 days after amendment file do	ate)
<u>Note:</u> If the date inserted in this blocdocument's effective date on the Dep	k does not meet the applicable statutory filing requi artment of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast.	for the amendment(s)

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Dated	05/13/2024
Signati	(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)
	Alfredo Ruiz
	(Typed or printed name of person signing)

(Title of person signing)