## N24000001910

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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## COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Gorp						
	Mighty Men Foundati	on Inc.				_
NAME OF CORPORATION	ł:					
	24000001910.					
DOCUMENT NUMBER:						
The enclosed Articles of Amer	ndment and fee are subn	nitted for filing.				
Please return all corresponden	ce concerning this matte	r to the following:				
Akeem Skinner						
		(Name of Contact Pe	erson)			
		(Firm/ Compan	y)			
1121 NW 5th St.		(Address)				
		(Addiess)				
Fort Lauderdale, FL 33311						
		(City/ State and Zip	Code)			
mightymenfoundation@gma						
E	mail address: (to be used	for future annual re	port notif	ication	)	
For further information conc	erning this matter, please	e call:				
Sophia Smart		_ 8	954 t		854-3585	
	Name of Contact Person	1)	(Area C	Code)	(Daytime Telephone N	umber)
Enclosed is a check for the fo	ollowing amount made p	ayable to the Florida	Departm	ent of	State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy enclosed)	is	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing A			treet Ado		оп	

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

Name of Corporation as currently filed with the Flori	da Dept. of State)
N24000001910	
(Document N	umber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	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: (Mailing address MAY BE A POST OFFICE BOX	
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	d office address in Florida, enter the name of the ffice address:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
HER NESTINION OF THE TAX	Florida
<del></del>	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent.	stered Agent: am familiar with and accept the obligations of the position.
	Signature of New Registered 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	PT         John Do           V         Mike Jo           SV         Sally Sr	<u>nes</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	<u>P</u>	Sophia Smart	2760 Somerset Dr. S108 Lauderdale Lakes, FL 333 [1
x Remove			
2) Change Add	<u>P</u>	Rance Kizer	2760 Somerset Dr. S108  Lauderdale Lakes, FL 33311
Remove 3) Change Add Remove			
4) Change Add	<del></del> -		
Remove			
5) Change Add			
Remove			
6) Change			
Remove			
E. If amending or additional she	ing additional Ar eets, if necessary).	ticles, enter change(s) here: (Be specific)	
		- <del></del>	
	<del></del>		

Effective date if applicable:	(no more than	90 days after	amendment file	date)		
The date of each amendment(s) adoption date this document was signed.						, if other than the
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						<del></del> .
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	_ <del></del>					
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		<u>.                                    </u>				<del></del>
		:				

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dated	February 20, 2024
<b>a</b> -	Pance Nate (Feb 29, 2024 §4.11 EST)
Signatu	(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)
	Rance Kizer
	(Typed or printed name of person signing)
	President
	(Title of person signing)