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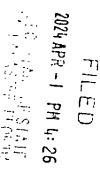
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

OUR NATIONS PROMISE KEPT CORP

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Contact Person)

KRAKEN LAW GRO

(Firm/ Company)

1420 GENE ST.

(Address)

WINTER PARK, FL 32789

(City/ State and Zip Code)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

(Name of Contact Person)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

Certificate of Status

畫 \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address

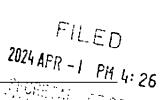
Amendment Section Division of Corporations P.O. Box 6327

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 of



(Name of Corporation as currently filed with the Flo	rida Dept. of State)	THE SECTION
(Document)	Number of Corporation (if know	n)
Pursuant to the provisions of section 617.1006, Florida 9 amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Pi	rofit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co <u>"Company" or "Co." may not be used in the name</u>	rporation" or "incorporated" o	r the abbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDE</u>	<u>RESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>		
D. If amending the registered agent and/or registere		er the name of the
new registered agent and/or the new registered of	nice aduress;	
Name of New Registered Agent		
New Registered Office Address:	(Florida	street address)
		, Florida
-	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		obligations of the position.
	Signature of New Registeres	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 Doc 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	$\frac{\underline{PT}}{\underline{V}}$ $\underline{\underline{SV}}$	John Do Mike Jo Sally Sr	ones	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change Add		_		
Remove				
2) Change Add		_		
Remove 3) Change 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)	
Upon the dissolution of this org	janization, a	assets sha	li be distributed for one or more exempt purposes within	the
meaning of section 501(c)(3) o	the Intern	al Revenue	e Code, or corresponding section of any future tederal ta	x code,
or shall be distributed to the federal government, or to a state or local government, for a public purpose				
PURPOSE: The organization is	s organized	t exclusivel	v for chantable relicious educational and scientific our	poses under

	al Revenue Code, or corresponding section of any futur	
1		
A / - A - A - A - A - A - A - A - A - A		
		
		
The date of each amendment(s) ac date this document was signed.	MARCH 26, 2024	, if other than the
Effective date <u>if applicable</u> :		
r. nective date <u>n applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirements, this c partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK_ONE</u>)	
■ The amendment(s) was/were as was/were sufficient for approva	dopted by the members and the number of votes cast for the amendal.	ment(s)

Dated	MARCH 26, 2024
Dated	at IA
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)
	Justin Harty
	(Typed or printed name of person signing)
	President

(Title of person signing)



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 Not for Profit Corporation pursuant to section 617,1006. 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.
- Figure 1 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 a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

The document must be typed or printed and must be legible.

Pursuant to section 617.0123, 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)
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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

Taliahassee, FL 32303

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

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