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SEUNCIPARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

FISION YOU DISTRICT INC.			
NAME OF CORPORATION: 40 STORY 1 99 DESTITE 1			
DOCUMENT NUMBER: NO 100000000000000000000000000000000000			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Nance Durham			
(Name of Contact Person)			
Fusion 49th District			
(Firm/ Company)			
808 49th St. S			
(Address)			
St. Peterslaurg Fl 33707			
(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) at (Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee			
Mailing Address Amendment Section Division of Corporations The Control of Tallahassee			

P.O. Box 6327 Tallahassee, FL 32314

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	ida Dept. of State)	
000000 N3400000	5269	
(Document N	lumber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the f	following
A. If amending name, enter the new name of the corp.	oration:	
_		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." of	r "Inc."
B. Enter new principal office address, if applicable:	EFE	
(Principal office address MUST BE A STREET ADDRE		
	<u> </u>	2021
		장
C. Enter new mailing address, if applicable:	>5	TÖ V
(Mailing address MAY BE A POST OFFICE BOX)	N. S.	<u> </u>
	<u>`ОСІ</u> *	TO [
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		-
D. If amending the registered agent and/or registered	l office address in Florida, enter the name of the	∞
new registered agent and/or the new registered off	fice address:	
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a	ered Agent: am familiar with and accept the obligations of the position.	
	Signature of New Registered Agent, if changing	<u>.</u>

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	$\overline{\underline{\mathbf{v}}}$ $\overline{\underline{\mathbf{Mil}}}$	n Doe se Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	\searrow	Sierra Clark	753 215+ AU. S SI PERUSBUE FI 33705
Remove 2) Change Add		Catherine Wolfe	720 60# St S GUIFPURT FI 33707
Remove 3) Remove Add Remove	S	Erin Kennedy	4757 10th AU.S 5+ Pekrsburg 19 33711
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or ad (attach additional st	ding additional heets, if necessar	Articles, enter change(s) here: y). (Be specific)	
Add E	IN H	99-1876800	
	···		

The date of each amendment(s) adoption: 93000 , if other than the date this document was signed. Effective date if applicable:		
Effective date if applicable:		
(no more than 90 days after amendment file date)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.		

. .

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 9/13/2024
(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)
(Typed or printed name of person signing)
President (Title of person signing)