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COVER LETTER

Division of Corporations NAME OF CORPORATION: _ EVET P. JOHNSON GROUP HOME INC. DOCUMENT NUMBER: P00000062294 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Evet Johnson Name of Contact Person EVET P. JOHNSON GROUP HOME INC. Firm/ Company 1215 NW 199 st Address Miami, Fl 33169 City/ State and Zip Code donnabraincoach@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 332-3868

Area Code & Daytime Telephone Number **Evet Johnson** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ■\$43.75 Filing Fee & **□\$43.75** Filing Fee & S35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

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

EVET P. JOHNSON GROUP HOME INC.

(Name of Corporation as cui	rrently filed with the Florida I	Dept. of State)	
P00000062294			
(Document Num	nber of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	, this Florida Profit Corporatio	n adopts the following amendmen	nt(s) to
A. If amending name, enter the new name of the corporation	on:		
		The new	
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "	o". A professional corporatio	ed" or the abbreviation "Corp.," on name must contain word	T1
B. Enter new principal office address, if applicable:		2年5 7	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		なので なので で へ へ	7
			Name of Street
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered office	e address in Florida, enter the	name of the	
new registered agent and/or the new registered office ad			
Name of New Registered Agent			
(Flor	ida street address)		
New Registered Office Address:		. Florida	
New Registered Office Address.	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered		utions of the mostifier	
I hereby accept the appointment as registered agent. I am fam	niiar wiin ana accept ine ootiga	titons of the position.	
Signature of ?	New Registered Agent, if changi	ng	
Check if applicable			

☐ 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.

<u>A</u> Change	<u>P1</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	Clunis Banton	3636 SW 167 Ave
X Add			MIRAMAR, FL 33027
Remove			
2) Change	ST	Maudlyn Scott	615 NW 195 Terrace
X Add			Miami Gardens, Fl 33169
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
_				
				
	<u> </u>			
				
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,			
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:			
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:			
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:			
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2/3/20 _____, if other than the The date of each amendment(s) adoption: _ date this document was signed. 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 incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) 2/9/20 Dated Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Evet Johnson (Typed or printed name of person signing) President

(Title of person signing)