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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:KE	EP EMPOWERING INC.
	20000017882
The enclosed Articles of Amendment and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
ST. JO	Saritha Challa Name of Contact Person KEEP EMPOWERING INC. Firm/ Company 2 SAINT CLAUDE PLACE Address HINS, FLORIDA 32259 Lity/ State and Lip Love to be used for future annual report notification)
For further information concerning this matte	er, please call:
	Area Code & Daytime Telephone Number I made payable to the Florida Department of State
\$35 Filing Fee	Fee & S43.75 Filing Fee & S52.50 Filing Fee tatus Certified Copy Certificate of Status Additional copy is enclosed) 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

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	Articles of Amen	ament	-23
	to	.•	(%)
	Articles of Incorp of	oration	· 一卷。
11 5		Time	
	EMPOWERING		
(Name of	Corporation as currently fil	<u>ed with the Florida Dep</u>	ot, of State)
Pa	00000 17882		
	(Document Number of Co	 	
	(11 01 211 111 111 111 111 111 111 111 11	· · · · · · · · · · · · · · · · · · ·	
Pursuant to the provisions of section 607.19 its Articles of Incorporation:	006, Florida Statutes, this <i>Flor</i>	ida Profit Corporation a	dopts the following amendment(
A. If amending name, enter the new nar	ne of the corporation:		
		N/A	
	 -		The new
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	rp," "Inc," or "Co". A pro		
B. Enter new principal office address, if	'annlicable:	N/A	
(Principal office address MUST BE A ST.			
C. Enter new mailing address, if applies (Mailing address MAY BE A POST O		N/A	
D. If amending the registered agent and new registered agent and/or the new	registered office address:	^	
Name of New Registered Agen	SARIT		
-	552 SAINT	CLAUDE	PLACE
	ST. JOHNS		22250
New Registered Office Address:			Florida 52259 (Zip Code)
	(City	,	(Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as register	unging Registered Agent: red agent. I am familiar with a	and accept the obligation	is of the position.
· · · · · · · · · · · · · · · · · · ·	Signature of New Regist	ered Agent, if changing	1= 1 - 1 - 1
	organise of her negist	crea ngem, y enanguig	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

	itional Articles, enter cha ecessary). (Be specific)		
		NIA	
		——————————————————————————————————————	
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	for un exchange reclassit	ication or cancellation of issued sn	450
f an amendment provides f	or the amendment if not	contained in the amendment itself:	<u>41 ().</u>
f an amendment provides f provisions for implementin			
f an amendment provides f provisions for implementin (if not applicable, indice	ate N/A)	,	
<u>provisions for implementin</u>	ate N/As	N/A ·	
<u>provisions for implementin</u>	ate N/A;	N/A ·	
<u>provisions for implementin</u>	ate N/A;	N/A ·	
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<u>provisions for implementin</u>	ate N/A;	N/A ·	
f an amendment provides f provisions for implementin (if not applicable, indica	ate N/A;	N/A ·	
<u>provisions for implementin</u>	ate N/A;	N/A ·	
<u>provisions for implementin</u>	ate N/A;	N/A ·	
<u>provisions for implementin</u>	ate N/A;	N/A ·	

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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)

Example:

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.

X Change	PT	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
(i) Change	,		N/A
Add			
Kentovė			
2) Change		-	
Add			
Remove 3) Cnange			
Add			
Remove			
4) Change			
Adć			
Remove			
51 Change			
Add			
Kemov i			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption:	if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
tho more than 90 days after amenament fite dates	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	nd shareholder
☐ 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 approva!	
☐ 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):	202
"The number of votes cast for the amendment(s) was/were sufficient for approval	2
bл	2022 1207 16
(voting group)	16
	MI 7:10
(By a director, president or other officer – if directors or officers have not beer, 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)	
(Title of person signing)	