P2100039645

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COVER LETTER

TO: Amendment Section Division of Corporations

Taliahassee, FL 32314

name of corporation: My Community Elevation Inc. document number: P21000039645						
DOCUMENT NUMBER: P210000.3 9645						
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 My Community Elevation Inc. Firm/ Company						
4425 N. CUCUA BIVA, H23						
Address' Shupes FL 32959 City/ State and Zip Code						
E-mail address: (to be used for future annual/report notification)						
For further information concerning this matter, please call:						
Deana Green at (3210) 475-2985 Name of Contact Person Area Code & Daytime Telephone Number						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & D\$52.50 Filing Fee & Certified Copy (Additional copy is enclosed)						
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Street Address Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee						

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2022 APR 27 AM 9: 30

THY COMMUNITY Elevation INC.	of the case of the board to see SEEC at the case
(Name of Corporation as current	tly filed with the Florida Dept. of State)SECR_1 [37] TALL A. I.A. SSEE. F
P210000391.45 (Document Number of	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Green Lynn INC. name must be distinguishable and contain the word "corporation."	The new
name must be distinghishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	4425 N Cocoa BIVd
(Principal office address MUST BE A STREET ADDRESS)	423
	Sharpes, FL 32959
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 add	dress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u> </u>
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	Florida
Hen Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	<u>u:</u>
I hereby accept the appointment as registered agent. I am familian	r with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
Check if applicable	

 \square 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)

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	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			

	adding additional Art al sheets, if necessary).	(Be specific)			
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lf an amendm	ent provides for an exc	hange, reclassificatio	n, or cancellation of iss	ned shares.	
provisions for	implementing the ame	endment if not contain	ned in the amendment	itself:	
	licable, indicate N/A)				
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The date of each amendment(s) adoption: Apol 22, 2027 date this document was signed.	, if other than the
Effective date if applicable: April 22, 2022 (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 document's effective date on the Department of State's records.	I 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 and action was not required.	i 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 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	
by	
(voting group)	
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 tiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President (Title of person signing)	

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