P21 000100400

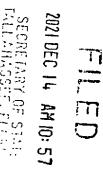
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COVER LETTER

	COVERLETTER
TO: Amendment Se Division of Cor	
NAME OF CORPO	PRATION: Sacred Circle Support Network, Corp
	IBER: P210000100400
The enclosed Article	s of Amendment and fee are submitted for filing.
Please return all corr	espondence concerning this matter to the following:
	Janice Michelle Gilbert
	Name of Contact Person
	Sacred Circle Support Network, Corp.
	Firm/ Company
	10281 SW Village Parkway, Suite 206
	Address
	Port Saint Lucie, Florida 34987
	City/ State and Zip Code
	gilbertmichelle3 l@gmail.com
	E-mail address: (to be used for future annual report notification)
For further informati	on concerning this matter, please call:
Janice Michelle Gilb	ertat ()at ()
Name	of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check f	or the following amount made payable to the Florida Department of State:
\$35 Filing Fee	□S43.75 Filing Fee & □S43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment Articles of Incorporation of

FILED 2021 DEC 14 AH 10: 57

Sacred Circle Sipport Network, Corp.

	SECRETARY OF STATE
(Name of Corporatio	n as currently filed with the Florida Dept. of State HASSEE, Florida
P21000100400	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the con	rporation:
	The new
name must be distinguishable and contain the word "con "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	0
(Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the
. If amending the registered agent and/or registere new registered agent and/or the new registered o	ed office address in Florida, enter the name of the
. If amending the registered agent and/or registere new registered agent and/or the new registered o	ed office address in Florida, enter the name of the
). If amending the registered agent and/or registere new registered agent and/or the new registered o	ed office address in Florida, enter the name of the ffice address:

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)

Add

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:	., and 1941	ay consists, cor wa wo cawa.	
X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>VP</u>	Lyle Fried	10281 SW Village Parkway
Add			Suite 206
X Remove			Port Saint Lucie, Florida 34987
2) Change	S/T	John Williams	10281 SW Village Parkway
Add			Suite 206
X Remove	VP	Valle, Was Cid had	10281 SW Village Parkway
3) Change	VP	Kathy Way-Giddarie	Suite 105
XAdd			Port Saint Lucie, Florida 34987
Remove			
4) Change	S/T	Donna Voorhies	4325 State Route 274 West
X Add			Huntsville, Ohio 43324
Remove			
5) Change		_	
Add			
Remove			
6) Change			

	sheets, if necessary).	icles, enter change(s) he (Be specific)			
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f an amendment	provides for an excl	nange, reclassification, o	or cancellation of issue	d shares	
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<u>provisions for im</u>	provides for an exchaplementing the ame able, indicate N/A)	nange, reclassification, on the name of th	or cancellation of issue d in the amendment its	<u>d shares,</u> <u>elf:</u>	
<u>provisions for im</u>	plementing the ame	nange, reclassification, on endment if not contained	or cancellation of issue d in the amendment its	<u>d shares,</u> <u>self:</u>	
<u>provisions for im</u>	plementing the ame	nange, reclassification, ondment if not contained	or cancellation of issue	d shares, elf:	
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<u>provisions for im</u>	plementing the ame	nange, reclassification, on the contained and th	or cancellation of issue	d shares, elf:	

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The date of each amendment(s) adoption:	, if other than the
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 document's effective date on the Department of State's records.	will 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 action was not required.	and 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):	r
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Signature Signat	
President ICEO	

(Title of person signing)