Division of Corporations Electronic Filing Cover Sheet

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(((H23000274925 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : IMPROVED REVENUE SERVICE INC

Account Number : I20190000119 Phone : (786)552-2905

Fax Number : (786)733-1744

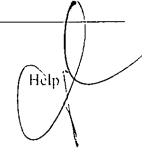
**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	

COR AMND/RESTATE/CORRECT OR O/D RESIGN HELPING WAVES INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu



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Articles of Amendment

(((H23000274925 3)))

Articles of Incorporation

HELPING WAVES INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P23000053257

(Document Number of Corporation (if known)

ent(s) to

Pursuant to the provisions of section 607,1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corp	noration adopts the following amendme
A. If amending name, enter the new name of the BETTER TIMES CENTE		The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "a "chartered," "professional association," or the a	lnc," or "Co". A professional corp	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	
D. If amending the registered agent and/or reg new registered agent and/or the new registe		ter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	ıCity	, Florida
	•	, .
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age.		obligations of the position.
<u></u>	iignature of New Registered Agent, if	changing

Check if applicable

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

Example:

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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)

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>	<u>John Do</u>	<u>c</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jos	nes	
X Add	<u>SV</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove Change	····		4801600000000000000000000000000000000000	
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change	••	_		
Add				
Remove				
6) Change		_		
Add				<u> </u>
Remove				

If amending or adding additional Articles, enter change(s) here:	(((H23000274925 3)))
Attach additional sheets, if necessary). (Be specific)	
	
f an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amen	
(if not applicable, indicate N/A)	William Nation
14	

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Effective date if applicable: Ino 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 by fivoling group) Dated 07/20/2023 Signature (By a director president or other officer – if directors or officers have not been selected, by the incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) IRAIDA POZO (Typed or printed name of person signing) PRESIDENT (Title of person signing)	The date of each amendment(s) adoption:	, if other than the
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. X 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	date this document was signed.	
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(Typed or printed name of person signing) PRESIDENT	selected, by an incorporator - if in the hands of a receiver, trustee, or other co	
PRESIDENT	IRAIDA POZO	
······································	(Typed or printed name of person signing)	
(Title of person signing)	PRESIDENT	
	(Title of person signing)	

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