P990000 44164

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u> </u>	Office Use Onl	<u>۔۔۔۔۔</u> اب



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COVER LETTER

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TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION: Infinite Personal P	ossibilities, Inc					
DOCUMENT NUMBI	P00000044164						
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.					
Please return all corresp	oondence concerning this ma	tter to the following:					
_		Mario Costa					
		Name of Contact Person	1				
_	Inf	inite Personal Possibilities,	Inc				
_		Firm/ Company					
	11	441 Interchange Circle Sou	th				
_	Address						
		Miramar, FL 33025					
_		City/ State and Zip Code	e				
		mariocosta@ipp.cc					
	E-mail address: (to be us	sed for future annual report	notification)				
For further information	concerning this matter, pleas	se call:					
Mario Costa		at (573-6333				
Name of	Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:				
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section on of Corporations Building				

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Infinite Personal Possibilities, Inc •

(<u>Name</u>		tly filed with the Florida Dept. of	State)
	P9900004		
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopt	s the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		•
N/A			THE now
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation	
B. Enter new principal office address,	if applicable:	1500 SW 98th Ave	SE SE
	(Principal office address MUST BE A STREET ADDRESS)		To the
			95F 20
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		1500 SW 98th Ave	
,		Pembroke Pines, FL 33025	
D. If amending the registered agent ar			<u>f the</u>
new registered agent and/or the ne		<u>ss:</u>	
Name of New Registered Agent	N/A		
	(Florida s	treet address)	
New Registered Office Address:	N/A	. Flo	orida
	-22-1	(City)	(Zip Code)
		(Oly)	(isp exac)
Name Designational Association (Company)	h		
New Registered Agent's Signature, if c I hereby accept the appointment as regist			the position.
,		accept the deligations of	and processing
			
	Signature of New	Registered Agent, if changing	

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>X</u> Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) X Change	P		Deborah Safko	1500 SW 98th Ave
Add				Pembroke Pines, FL 33025
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

A	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
	_						
						<u> </u>	
			-				
		_					
							 -

f an am	endment provides	s for an exchang	ge, reclassifica	tion, or cancella	tion of issued s	hares,	
provision	ons for implement not applicable, indi	ting the amenda	nent if not con	tained in the an	nendment itself:	1	
•	чог аррисате, та	icaie IV/A)					
<u> </u>							
	•						
			-				
					_,		
			·				

	8/22/2016	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
'8/	22/2016	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date wide Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
8/22/201 Dated	Mari La	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Mario Costa	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	