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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

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he following:		
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uture annual report	notification	
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	for filing.  the following:  The of Contact Person (Address)  (Address)  (Address)  (State and Zip Contact annual report (Address)  (Address)	for filing.  the following:  the of Contact Person)  Firm/ Company)  (Address)  / State and Zip Code)  ture annual report notification  at 904  at (Area Code)  to the Florida Department of S  3.75 Filing Fee & \$52.50  ctified Copy Certific Copy is closed)

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

#### SHARING HOPE AND REACHING PEOPLE INC

(Name of Corporation as	currently filed with the Flor	ida Dept. of State)
N18000008351		
(Document	Number of Corporation (if ki	nown)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation;	Statutes, this Florida Not Fo	r Profit Corporation adopts the followin
A. If amending name, enter the new name of the con	rporation:	
		The nev
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD)</u>		
	<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
	<del></del>	
D. If amending the registered agent and/or registers		enter the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent:		
	(Fle	orida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:	₽ <sub>0</sub> ~
hereby accept the appointment as registered agent. I	am familiar with and accept	the obligations of the position with the obligation of the position with the positio
	Signature of New Regist	ered Agent, if changing
	Page 1 of 4	F STATE

### 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;  $V \simeq Vice President$ ; 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: X_Change X_Remove X_Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Remove			<del></del>
2) Change Add			
Remove  Change	<u>T</u>	Robyn Mejia	95145 Woodbridge Parkway Apt. 201
X AddRemove			Fernandina Beach, FL 32034
4) Change Add			
Remove			
5) Change Add			
Remove 6) Change			
Add			

## E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

ARTICLE III
Sharing Hope and Reaching People INC is a non-profit corporation and shall operate exclusively for charitable,
religious, educational, or scientific purposes under Section 501 (c) (3) of the Internal Revenue Code, or
corresponding section of any future tax code. Sharing Hope and Reaching purpose to is provide commulty
outreach. Specifically, we will provide meals, sustenance items, fellowship, as well as a plethora of other services
with the goal of helping the homeless and those in need.
Dissolution:
"Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within
the meaning of Section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future tax code,
or shall be distributed to the federal government, or to a state or local government, for specific purpose.

rhe	date of each amendme	nt(s) adoption:	, if other than the
late	this document was signe	d.	
- FF.	estive data if applicable	August 6, 2018	
2111	ective date <u>if applicable</u>	(no more than 90 days after amendment file date)	
		this block does not meet the applicable statutory filing requirements, this date will r the Department of State's records.	not be listed as the
٩d٥	option of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was- was-were sufficient for	were adopted by the members and the number of votes cast for the amendment(s) approval.	
	There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Aug Dated	ust 6, 2018	
	Signature	oble Snik	
	(By the have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	F	obbin Smith	
	_	(Typed or printed name of person signing)	
	Р	resident	
	-	(Title of person signing)	