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1/19/23, 12:52 PM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : PARASEC Account Number : I20180000086 Phone : (916)576-7000 Fax Number : (800)603-5868

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 SERVICING THOSE IN NEED, INC.

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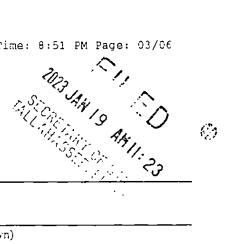
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Help

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Articles of Amendment to Articles of Incorporation of



SERVICING THOSE IN NEED, INC.

(Name of Corporation as currently filed with the FI	orida Dept. of State)	• .
N21000009265		
(Document	Number of Corporation (if kn	lown)
Pursuant to the provisions of section 617 1006, Florida amendment(s) to its Articles of Incorporation	Statutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "c "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>		
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BO.	<u>Λ</u>);	
 If amending the registered agent and/or register new registered agent and/or the new registered of 		enter the name of the
	mirec array ess.	
Name of New Registered Agent:		
New Registered Office Address	(Flo	ında street oddressi
Men megalered office fittings		
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent:	·
	Signature of New Registe	ered Agent if changing

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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 = Charman 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	$\overline{V} = \overline{M}$	<u>hn Doe</u> ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Namç</u>	<u>Addres</u> s
1) <u>X</u> Change Add	<u> </u>	KATRINA BAKER	1522 MOONLITE DR LAKELAND, FL 33801
Remove			
2) Change Add			
Remove Change Add Remove			
4) Change Add			
Remove			
51 Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or addi</u> (attach additional she		Articles, enter change(s) here vy). (Be specific)	

		
		
		
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The date of each amondment is adopted	on:	if other than the
date this document was signed	711.	II outer amir the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not beent of State's records.	ne listed as the
Adoption of Amendment(s)	(CHECK ONE)	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval

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(Title of person signing)

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