

N23000012792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

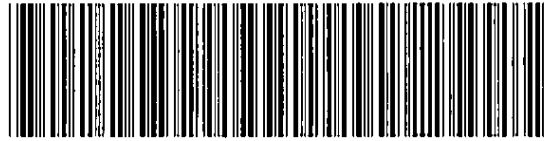
(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2023

MELISSA PARKER
128 N GREENFIELD AVE
TAMPLE TERRACE, FL 33617

SUBJECT: HOUSE OF RESTORATION TAMPA CORPORATION
Ref. Number: N23000012792

We have received your document for HOUSE OF RESTORATION TAMPA CORPORATION and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Florida Not for Profit Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 323A00026030

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: House of Restoration Tampa

DOCUMENT NUMBER: N23000012792

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa Parker
(Name of Contact Person)

House of Restoration Tampa Corporation
(Firm/ Company)

128 N. Greenfield Ave
(Address)

Temple Terrace, FL 33617
(City/ State and Zip Code)

houseofrestorationtampa@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Parker at 727 - 470 - 7696
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|--|---|--|---|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

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

N23000012792
(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ *The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**) _____

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**) _____

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address: _____

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
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- | | | | |
|--|------------|-----------------------------|--|
| 1) <input checked="" type="checkbox"/> Change
<input checked="" type="checkbox"/> Add | <u>V</u> | <u>Binh Nguyen</u> | <u>11232 Carnoustie
Dr. Odessa FL 33556</u> |
| <input type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add | <u>TR</u> | <u>Loris Petit-Frere</u> | <u>6111 Magnolia Park Blvd.
Rivermead FL 33178</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input checked="" type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>CEO</u> | <u>Kristina Pietrangelo</u> | <u>128 N. Greenfield Ave
Temple Terrace FL 33617</u> |
| 4) <input checked="" type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>COO</u> | <u>Melissa Parker</u> | <u>128 N. Greenfield Ave
Temple Terrace FL 33617</u> |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ | _____ |
| 6) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ | _____ |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Article 3. Please see attached document
for clarification of verbiage

Article 8. Please see attached document
for additional Board Members

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)

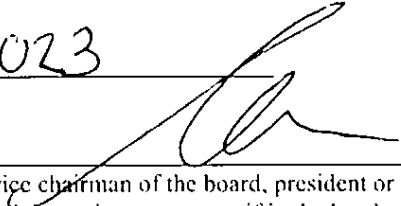
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

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

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 11/27/2023

Signature 
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Melissa Parker
(Typed or printed name of person signing)

Chief of equity Officer & Controller
(Title of person signing)
House of Restoration
Tampa Corporation

11/27/2023

Amendment 199
Articles of Incorporation
for
House of Restoration Tampa Corp.

The undersigned Incorporator of House of Restoration, a non-profit corporation, adopts the following Articles of Incorporation:

**Article I
Name**

The name of the corporation is House of Restoration Tampa.

**Article II
Duration**

The period of the corporation's duration is Jan 2024-.

**Article III
Purpose**

The purpose for which the corporation is organized is to conduct any and all lawful business for which corporations can be organized pursuant to statute Social Services, including but not limited to: access to religious faith based educational curriculum/classes, charity, and a place of worship for families.

**Article IV
Powers**

The corporation has the power to engage in any lawful activity, pursuant to the laws of the State of Florida, including the opening and operating of a bank account.

**Article V
Initial Registered Agent**

The name and address of the corporation's initial registered agent is:

Melissa Parker

128 N Greenfield Ave, Temple Terrace FL 33617

The corporation maintains in its corporate records the statement of acceptance by the registered agent.

**Article VI
Principal Office & Mailing Address**

The complete street address of the corporation's designated principal office is:

128 N Greenfield Ave

and the corporation's mailing address is:

128 N Greenfield Ave, Temple Terrace Fl 33617

**Article VII
Authorized Shares**

The number of shares of stock the corporation is authorized to issue is: 0. The class of stock issued shall be 0 stock.

Each share shall have a par value of \$ 0.

**Article VIII
Directors & Officers**

The initial directors and officers shall be the following persons and positions:

President <u>Gina Hill</u>	Address <u>15514 Lake Bella Vista Dr, Tampa Fl 33625</u>
Vice President <u>Binh Nguyen</u>	Address <u>16232 Carnoustie Dr, Odessa Fl 33556</u>
Treasurer <u>Loris Petit-Frere</u>	Address <u>6111 Magnolia Park Blvd, Riverview Fl 33578</u>
Secretary _____	Address _____
Director _____	Address _____
Director _____	Address _____

**Article IX
Bylaws**

The Incorporator shall adopt the initial bylaws of the corporation. The shareholders may amend the bylaws at any time by the provisions provided therein.

**Article X
Dissolution**

Upon dissolution, assets shall be distributed by the board of directors according to the applicable statutes and regulations for the State of Florida. Further provisions regarding distribution upon dissolution shall be stated in the corporation's bylaws.

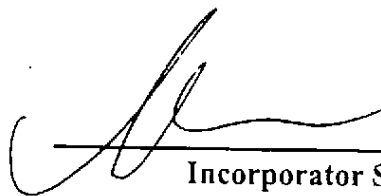
**Article XI
Indemnification**

The corporation does indemnify any directors, officers, employees, incorporators, and shareholders of

the person fraudulently and intentionally violated the law and/or maliciously conducted acts to damage and/or defraud the corporation, or as otherwise provided under applicable state corporate statute.

**Article XII
Incorporator**

I, Melissa Parker, residing at 128 N Greenfield Ave, Temple Terrace Fl 33617,
execute these Articles of Incorporation dated this November day of 3, 2023.



Incorporator Signature

Melissa Parker
Incorporator Name

Correspondence Information is:

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314