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SICRETARIES FLORIDA

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PR 1 0 2015

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: We Help	Communitie	es to Develop Co
DOCUMENT NUMBER: N1400001	1334	
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Quesona Peterson		
	(Name of Contact Person	n)
	(Firm/ Company)	
349 SE 3rd St.		
	(Address)	
Belle Glade, Florida 33	430	
	(City/ State and Zip Cod	e)
quesona10@gm		
	sed for future annual report	notification)
For further information concerning this matter, plea		004 5540
Quesona Peterson	561	261-5548 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	& \$\subseteq\$\$\\$43.75\$ Filing Fee & Certified Copy (Additional copy is enclosed)	□\$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	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation

FLED

15 APR -8 AM 9:36

WE HELP COMMUNITIES TO DEVELOP CORPORATION CARRIED TO DRIVE

(Name of Corporation as currently filed with N1400011334	ith the Florida Dept. of State)
(Document Number of Corpo	pration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	ition:
HELPING COMMUNITIES DEVELO	P CORPORATION The new
name must be distinguishable and contain the word "con"Corp.," "Inc.," or Co.," or the designation "Corp," "Incword "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	N/A S)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent N/A	
	lorida street address)
New Registered Office Address: N/A	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo	

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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Joi Sally Sm	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Remove				
2) Change		_		
Add				
3) Change	.	_		
Add Remove				
4) Change		_		
Add Remove				
5) Change		_		
Add				
Remove 6) Change				
Add		_		
Remove				

If amending or adding additional Articletach additional sheets, if necessary).	(Be specific)
	,

The date of each amendment(s) adoption: January 1, 2015		, if other than the	
date this document was signed		,	
Effective date <u>if applicable</u> :	January 1, 2015		
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.		
There are no members or adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.		
Dated	7//1/2015		
Signature	Suesona Peterso		
(By th have	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)	_	
Queso	ona Peterson		
	(Typed or printed name of person signing)		
Secret	ary		
	(Title of nerson signing)		