

N00000007497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

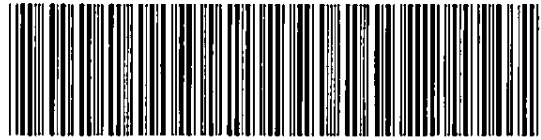
(Document Number)

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01/10/24--01014--013 **43.75



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2024

CARLA M MILES
658 CHIPPER DRIVE
SUN CITY CENTER, FL 33573

SUBJECT: THE HOPE FUND FOR CHILDREN, SOUTHSORE INC.
Ref. Number: N00000007497

We have received your document for THE HOPE FUND FOR CHILDREN, SOUTHSORE INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please ensure the full address is listed for all officers and directors.

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: 224A00001998

*Amendment Section
Division of Corporations
Fl. Department of State*

*corrected &
enclosed AS
requested
MY Apology
for not
recognizing
the error,*

*My Apologies
Greg Ewing
370-540-2753*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Thr Hope Fundfor Children, Southshore, Inc.

DOCUMENT NUMBER: N00000007497

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

Please return all correspondence concerning this matter to the following:

Carla M Miles

(Name of Contact Person)

The Hope Fund for Children, Southshore, Inc.

(Firm/ Company)

658 Chipper Drive

(Address)

Sun City Center, FL 33573

(City/ State and Zip Code)

ewing2714@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gregory A Ewing

330

540-2753

at

(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:

☒ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$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

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

The Hope Fund for Children, Southshore, Inc.

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

(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: _____

New Registered Office Address:

(Florida street 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:

☒ Change	<u>PT</u>	<u>John Doe</u>
☒ Remove	<u>V</u>	<u>Mike Jones</u>
☒ Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) ☒ Change ☐ Add ☐ Remove	<u>D</u>	<u>Carla M. Miles</u>	<u>658 Chipper Drive, Sun City Center</u> <u>Florida, 33573</u>
2) ☐ Change ☒ Add	<u>P</u>	<u>Beth A Ewing</u>	<u>15438 Santa Pola Drive, Wimauma</u> <u>Florida 33598</u>
☒ Remove 3) ☐ Change ☐ Add ☐ Remove	<u>T</u>	<u>Marjorie Castiglia</u>	<u>2411 Emerald Lake Drive, Apt. 209</u> <u>Sun City Center, FL 33573</u>
4) ☐ Change ☒ Add ☐ Remove	<u>T</u>	<u>Gregory A. Ewing</u>	<u>15438 Santa Pola Drive, Wimauma</u> <u>Florida, 33598</u>
5) ☐ Change ☐ Add ☐ Remove			
6) ☐ Change ☐ Add ☐ Remove			

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

The date of each amendment(s) adoption: September 14, 2023, 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.

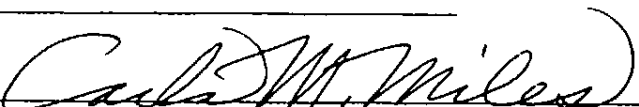
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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 9/14/2023

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)

Carla M Miles

(Typed or printed name of person signing)

Principal/Director

(Title of person signing)