

NOI 000002000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

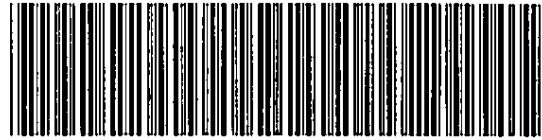
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Amend

08/01/20

ALLRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Family and Youth Help Center, Inc.

DOCUMENT NUMBER: N01000002000

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

Please return all correspondence concerning this matter to the following:

Clyde Glover
(Name of Contact Person)

(Firm/ Company)

20789 NW 9th Ct Bldg 9 Apt. 201
(Address)

Miami Gardens, FL 33169
(City/ State and Zip Code)

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

For further information concerning this matter, please call:

egloverfam@yahoo.com (786) 663-7902
(Name of Contact Person) at (Area Code) (Daytime Telephone Number)

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

- | | | | |
|---|--|---|--|
| <input checked="" 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 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

Family and Youth Help Center, Inc.

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

N01000002000

(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)

20789 NW 9th Ct.

Bldg 9 Apt. 201

Miami Gardens, FL 33169

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

20789 NW 9th Ct.

Bldg 9 Apt. 201

Miami Gardens, FL 33169

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: Clyde Glover

20789 NW 9th Ct. Bldg 9 Apt 201

(Florida street address)

New Registered Office Address:

Miamia Gardens

(City)

Florida 33169

(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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>VCV</u>	<u>Pauletta V. Roberts</u>	<u>2815 NW 169 Terr</u> <u>Miami Gardens, FL 33056</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>S</u>	<u>Tyonna Leslie</u>	<u>149 N. Streeper Street</u> <u>Baltimore, MD 21224</u>
<input checked="" type="checkbox"/> Remove			
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Clyde Glover</u>	<u>20789 NW 9th Ct.</u> <u>Bldg 9 Apt 201</u> <u>Miami Gardens, FL 33169</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>VP</u>	<u>Alexander Jackson</u>	<u>1780 SW 131st Terr</u> <u>Davie, FL 33325</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>S</u>	<u>Crystal Sheldon</u>	<u>13832 NW 10th Ct</u> <u>Pembroke Pines, FL 33028</u>
<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)

- ☐ 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 August 14, 2020 _____

Signature Clyde Glover
(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)

Clyde Glover

(Typed or printed name of person signing)

President

(Title of person signing)