No 1000002095

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: _	HELPING Hands Outreach of Winter Haven, Inc.	
DOCUMENT NUMBER:	1000002095 -	
The enclosed Articles of Amendm	ent and fee are submitted for filing.	
Please return all correspondence c	oncerning this matter to the following:	
	Alton Whidden (Name of Contact Person)	+
	Helping Hands Outreach of Winter Haven, Inc. (Firm/Company)	
	6 Coleman Road (Address)	
	Winter Haven, FL 33880 (City/ State/ and Zip Code)	f.
For further information concerning	g this matter, please call:	
Alton Whidde (Name of Contact Perso		
Enclosed is a check for the following	ing amount:	
	Filing Fee & Status Status Certified Copy (Additional copy is enclosed) Status Status Certified Copy (Additional Copy is enclosed) Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corpora P.O. Box 6327		

Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 4, 2005

ALTON WHIDDEN
HELPING HANDS OUTREACH OF WINTER HAVEN
6 COLEMAN ROAD
WINTER HAVEN, FL 33880

SUBJECT: HELPING HANDS OUTREACH OF WINTER HAVEN, INC. Ref. Number: N01000002095

We have received your document for HELPING HANDS OUTREACH OF WINTER HAVEN, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6880.

Karen Gibson Document Specialist

Letter Number: 205A00022791

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Articles of Amendment to Articles of Incorporation of

Common of the state of the stat Helping Hands Outreach of Winter Haven, Inc

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

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(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:

VILLAGE OASIS,	Inc.		Pagaga state Light		4 4 4
(must contain the word "corporat language; "Company" or "Co." r	tion," "incorporated,	or the abbreviat	ion "corp." or "inc. for profit corporati	" or words of like on)	import in
AMENDMENTS ADOPT	ED- (OTHER T	THAN NAME	CHANGE) Ind	licate Article	
Number(s) and/or Article T	me(s) being ame	ended, added of	deleted: (<u>DE 5</u>	PECIFIC)	
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(Attach additional pages if necessary) (continued)

The date	of adoption of the amendment(s) was: 3-15-05	
Effective	date if applicable: 4-1-05	
	(no more than 90 days after amendment file date)	
Adoption	of Amendment(s) (CHECK ONE)	
	The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.	
***	There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.	
	Signed this 21st day of March , 2005	
Sig	(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.)	a a 1948
	Alton Whidden (Typed or printed name of person signing)	
	Director (Title of person signing)	

FILING FEE: \$35