N0300000138

(Aequesion's Manne)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Lec Foxed Pay 4 of 4 on Links from B. Gray.

Office Use Only

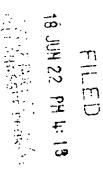
4135-544-547-



300313679613

06/04/16--01014--010 •••65.00

S TALLENT JUN 22 2018



Mond



June 18, 2018

BRENDA GRAY 1535 STATE ROAD 64 WEST AVON PARK, FL 33825

SUBJECT: HEARTLAND COALITION FOR THE HOMELESS, INC.

Ref. Number: N03000000138

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 318A00012648

-www.sunbiz.org

District of Constant and D.O. DOV (1997, Well-bound Blottle 1991)



June 6, 2018

BRENDA GRAY 1535 STATE ROAD 64 WEST AVON PARK, FL 33825

SUBJECT: HEARTLAND COALITION FOR THE HOMELESS, INC.

Ref. Number: N03000000138

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Letter Number: 818A00011780

Claretha Golden Regulatory Specialist II

www.sunbiz.org

Commentary D.O. DOV 6397 Mattacase Etasida 99

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, Fl. 32314

NAME OF CORPORATION: Heartland Coo	alition For The Homeless, INC
DOCUMENT NUMBER: ND300000	2138
The enclosed Articles of Amendment and fee are submitted for fi	ling.
Please return all correspondence concerning this matter to the foll	owing:
Brenda Gray	Contact Person)
Heartland Coalition For The	Company)
1535 State Road 64 W	Jest ddress)
Avon Park, FL 3382.	s and Zip Code)
brendagra, Chighlandsh	innual report notification)
For further information concerning this matter, please call:	
Brenda Gray (Name of Contact Person)	at 863 - 453-890/ (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 & ☐\$43.75 F Certificate of Status Certified (Additional centions of Status)	Copy Certificate of Status nal copy is Certified Copy
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

Headland Coglition For T	
(Name of Corporation as currently	y filed with the Florida Dept. of State)
ND3000000	138
	of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporatio	<u>n:</u>
	The new
name must be distinguishable and contain the word "corporatio "Company" or "Co." may not be used in the name,	on" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST_BE A STREET ADDRESS</u>)	:
-	-:
-	
C. Enter new mailing address, if applicable:	22
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
-	<u> </u>
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 ad	
Name of New Registered Agent. Jan	e Breylinger
<u>1535</u>	- State Ruad 64 West
New Registered Office Address:	(Florida street address)
	P at 22815
HVOY	Park Florida 33825
	(City)
New Registered Agent's Signature, if changing Registered A	gent:
I hereby accept the appointment as registered agent. I am fam	mar with and accept the obligations of the position.
\mathcal{O}	De la la solo
- Sie	nature of New Registered Agent, if granging

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>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>P</u> _	Glenn Phillips	1535 State Road 64 West Avon Park, FL 33825
2) Change Add Remove	工	Scott Walker	1535 State Road 64 Wrst Avon Pack, FL 33825
3) _X_ Change Add Remove	ρ	Jane Breylinger	1535 State Road 64 West Avon Park, FL 33825
4) ChangeAddRemove	<u>T</u> _	Fred Schilffarth	1535 State Road 64 West Avon Park, FL 33825
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional Arti tach additional sheets, if necessary).	(Be specific)				
· · · · · · · · · · · · · · · · · · ·					
			<u></u>		
·····					
					
					
			· · · · · · · · · · · · · · · · · · ·		
			_ 		
		<u></u>			
			-		
		<u> </u>			
					

. .

The date of each amendment(s) adoption: _date this document was signed.	may 24, 2018	if other than the
Effective date <u>if applicable</u> : \(\frac{\sqrt{no}}{\integral}\)	Day 24, 2018 w more than 90 days after amendment file da	ute)
Note: If the date inserted in this block does n document's effective date on the Department	not meet the applicable statutory filing require of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes east for	or the amendment(s)
There are no members or members entitl adopted by the board of directors.	iled to vote on the amendment(s). The amend	lment(s) was/were
Dated June	22.2018	
have not been selecte	vice chairman of the board, president or other ed, by an incorporator – if in the hands of a re d fiduciary by that fiduciary)	officer-if directors occiver, trustee, or
Bre	Yda Czray (Typed or printed name of person sign	ning)
Exe	cutive Director	r

(Title of person signing)