NO300008666

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

HOPE Services NAME OF CORPORATION:	, Incorporated		
N03000008666 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are			
Please return all correspondence concerning this	matter to the following	; :	
Cindy Irene Bray			
	(Name of Contac	t Person)	
HOPE Services, Incorporated			
	(Firm/ Comp	any)	
2406 Cypress Glen Drive, Suite 102			
	(Address)	-1
Wesley Chapel, Florida 33544			٠.
	(City/ State and Z	Zip Code)	
cbray@hopegetsjobs.com			
E-mail address: (to be	used for future annual	report notificatio	n)
For further information concerning this matter, p	lease call:		
Cindy Irene Bray		813 at	629-9717
(Name of Contact Pe			(Daytime Telephone Number)
Enclosed is a check for the following amount ma	ide payable to the Flori	da Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta	e & \$\subseteq\$\$43.75 Filing Fatus Certified Copy (Additional copenclosed)	Certif by is Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Sect Division of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

HOPE Services, Incorporated

(Name of Corporation as currently filed with the Florida Dept. of State) N03000008666 (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: 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. 5426 Land O Lakes Boulevard B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Land O Lakes, Florida 34639 C. Enter new mailing address, if applicable: 5426 Land O lakes Boulevard (Mailing address MAY BE A POST OFFICE BOX) Land O Lakes, Florida 34639 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: (Florida street address) New Registered Office Address: , Florida __ (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: X Change X Remove X Add	V Mik	n Doe se Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change Add	<u>D</u>	Dotti Groover-Skipper	11306 Carrollwood Drive Tampa, Florida 33618-3704
x Remove			
2) Change Add	<u>D</u>	Michael McCord	3111 Cordoba Ranch Blvd. Lutz, Florida 33559
X Remove	<u>D</u>	Don Orrico	3328 Thistledown Lane Land O Lakes, Florida 34638
4) Change Add			
Remove			
5) Change Add		 	
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		Articles, enter change(s) here: v). (Be specific)	

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The base of the second			
date this document was signed.	otion:		, if other than the
date this document was signed.			
Effective date if applicable:			
	(no more than 90 days after amendment	file date)	<u> </u>
Note: If the date inserted in this bloc document's effective date on the Department.	does not meet the applicable statutory filing rtment of State's records.	g requirements, this date will not b	e listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add was/were sufficient for approval.	oted by the members and the number of vote	es cast for the amendment(s)	

	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	January 15, 2024 Dated
	Signature ound Toran
-	(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)
•	CONRAD J BRAY
	President Stand of Directors (Title of person signing)
•	(Typed or printed name of person signing) President, Brand of Directors (Title of person signing)