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13 JUL 15 PM 4: 13
SECRETARY OF STATE
NHASSEE FLORING

C. LEWIS
JUL 18 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporation	IS			
NAME OF CORPORATION	Hope Fou	Indation Of	South Florida Inc	
DOCUMENT NUMBER:	N04000003	647		
The enclosed Articles of Am	nendment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matte	er to the following:		
Angela Wilso	n			
		(Name of Contact Person)	
Hope Founda	ation Of Sou	ıth Florida lı	nc	
		(Firm/ Company)		
Po Box 6405	85			
		(Address)		
Miami Florida	a 33164			
		(City/ State and Zip Code	()	
hopef	oundationof	sfl@yahoo.d	com	
E	-mail address: (to be used	for future annual report r	notification)	
For further information conc	erning this matter, please	call:		
Angela Wilson		_{at (} 786	715-9910 de & Daytime Telephone Number)	
(Name of Co	ntact Person)	(Area Co	de & Daytime Telephone Number)	
Enclosed is a check for the f	following amount made pa	yable to the Florida Depa	rtment 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)	
7.5 111 . A	• •	S : 4	4.13	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**

FILED 13 JUL 15 PM 4: 19

Hope Foundation Of South Florida Inc

SECRETARY OF STATE TALLAHASSEE. FLORIDA

(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. amendment(s) to its Articles of Incorporat		s, this Florida Not For F	Profit Corporation adopts the following	
A. If amending name, enter the new na	me of the corporati	on:		
n/a			The ne	
name must be distinguishable and contain		ion" or "incorporated"		
"Company" or "Co." may not be used in B. Enter new principal office address,		44 NW 150 ST		
(Principal office address MUST BE A STREET ADDRESS)		Miami Florida 33167		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Po Box 640585		
		Miami Florida 33164		
D. If amending the registered agent an new registered agent and/or the new			ter the name of the	
Name of New Registered Agent:	Angela Wilson			
	7959 NW 1	0 Ct		
New Registered Office Address:		(Floridu street address)		
	Miami Florida		, Florida 33179	
	(City)		(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered	Agent:		
I hereby accept the appointment as regist	Harber-	W	e obligations of the position.	
Sig		tered Agent, if changing		

Page 1 of 4

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 <math>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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	Andre Mccloud	960 NW 180TH TERR
Add X Remove			Miami Florida 33169
2) Change	CEO	Carlos Blake	2025 NE 164 ST
X Add Remove			#809 Miami Florida 33163
3) Change Add			
Remove			
4) Change	<u>coo</u>	Sharon Brown	960 NW 180TH TERR
Add X Remove			Miami Florida 33169
5) Change	Trea	Angela Wilson	7959 NW 10 CT
X Add			Miami Florida 33179
Remove			
6) Change	4	13	<u>.</u> - <u></u>
Add			- Andrew Printer and Andrew House Ho
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
ARTICLE V1 ARTICLES OF DISSOLUTION
IN CASE OF DISSOLUTION ASSETS OF HOPE FOUNDATION WILL
BE DONATED TO MEMBERS OF FOUNDATION.
ARTICLE III
THE SPECIFIC PURPOSE FOR WHICH THIS CORPORATION IS ORGANIZED
IS: TO MEET THE NEEDS OF INDIVIDUALS WHO ARE LOW TO NO
INCOME EARNERS, AND PROVIDE VARIOUS SUPPORT TO THE
COMMUNITY-AT-LARGE.

The date of each amendment	t(s) adoption: 07/08/2013	FILED	
Effective date <u>if applicable</u> :	07/09/2013	SECRETARY	
	(no more than 90 days after amendment file date)	SECRETARY OF STATE TALLAHASSEE. FLORIDA	
Adoption of Amendment(s)	(CHECK ONE)	SSEE. FLORIDA	
The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the oproval.		
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(directors.	s) was/were	
Dated <u>07/</u>	08/2013		
Signature	e chairman or vice chairman of the board, president or other office	er-if directors	
have r	not been selected, by an incorporator – if in the hands of a receive court appointed fiduciary by that fiduciary)		
Alana (Grant		
	(Typed or printed name of person signing)	*****	
Vice C	hairman		
	(Title of person signing)	_	