

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
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02/22/10--01046--007 **35.00

SECRETARY OF SIX

ATTAIN C

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORP	ORATION: Wings	of Love and	Hope
DOCUMENT NUI	MBER: NOSC	000006260	
The enclosed Articl	les of Amendment and fee ar	re submitted for filing.	
Please return all cor	respondence concerning this	s matter to the following:	
_	Edward	Martines ame of Contact Person	
-	Wingsof	Love and Hop Firm/Company	se Inc.
-	6115 W	negard Rd. Address	
-	orlando ci	ty/ State and Zip Code	9
	E-mail address: (to be used	for future annual report notification)	
For further informate	tion concerning this matter, j	please call:	
Edward	of Contact Person	at (407) 927- Area Code & Daytime Tel	4949 lephone Number
Enclosed is a check	for the following amount m	ade payable to the Florida Depar	tment 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)
Mailing Address Amendment Section		Street Address Amendment Section	·
Division of Corporations		Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle



February 23, 2010

EDWARD MARTINEZ 6115 WINEGARD RD ORLANDO, FL 32809

SUBJECT: WINGS OF LOVE AND HOPE, INC.

Ref. Number: N05000006260

We have received your document for WINGS OF LOVE AND HOPE, 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) 245-6957.

Letter Number: 310A00004443

Tracy L Lemieux Regulatory Specialist II

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Articles of Amendment

to to
Articles of Incorporation $r_0 = \frac{\mathcal{E}}{2}$
of Map
(Name of Corporation as currently filed with the Florida Dept. of State) NO 500006260
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
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:

New Registered Office Address: (Florida street address)

> (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

D.

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the

Signature of New Registered Agent, if changing

Page 1 of 3

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)

Type of Action <u>Address</u> **Title** <u>Name</u> _ 🔲 Add ☐ Remove _____ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

	2/12/10
The date of each amendment(s) ad	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.
have not other cou	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or int appointed fiduciary by that fiduciary)
 -	(Typed or printed name of person signing)
	President (Title of person signing)

Page 3 of 3