N05000009345

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SECRETARY OF STATE
TALLAJIASSEE, FI POLIF

Amend

NOV 1 3 2012

T. LEWIS

* COVER LETTER

TO: Amendment Section Division of Corporations

- · · · · · · · · · · · · · · · · · · ·		
NAME OF CORPORATION: Heart's De	esire, Inc.	
DOCUMENT NUMBER: N0500009		
The enclosed Articles of Amendment and fee are subn	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Kalisha Eagle		
	(Name of Contact Perso	on)
Heart's Desire, Inc.		
	(Firm/ Company)	
PO Box 708		
	(Address)	
Newberry, Florida 32669		
	(City/ State and Zip Cod	ie)
kalishaeagle@yal		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Kalisha Eagle	_{at (} 352	575-3561 Code & Daytime Telephone Number)
(Name of Contact Person)	(Area C	Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	partment of State:
\$35 Filing Fee \$\Bigcup \$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		Address
Amendment Section Division of Corporations		dment Section on of Corporations
P.O. Box 6327		n Building
Tallahassee, FL 32314	2661	Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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LUIZ NOV.	_
SECRETARY ALLAHASSE	OF STAT
	FLORIDA

Heart's Desire, Inc.

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

N05000009345

Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporati	i <u>on:</u> The n
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable:	726 NW 8th Avenue
(Principal office address MUST BE A STREET ADDRESS)	Gainesville, FL 32601
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 708
	Newberry, FL 32669
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office at Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	
Signature of New Register	tored 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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	CEO	Kalisha Eagle	PO Box 708
Add			Newberry, FL 32669
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change		4	
Add			
Remove			
6) Change			
Add	., , * , , * ***		
Remove			

Ε.	If amending or adding additional Art	<u>ticles, enter change(s) here</u>
	(attach additional sheets, if necessary).	(Be specific)

Article 3: Purpose

This organization is organized exclusively for charitable, religious, educational, and scientific purposes under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code. Our goal is to lessen the burdens of government by training, educating, developing, assisting, supporting, and coaching individuals, groups of individuals, or organizations that are disabled, unfortunate, underprivileged, or disadvantaged, through activities of personal and professional development, to economically enhance their quality of life, intellect, work and social opportunities, physical abilities, as well as their self-esteem, and social status within society.

Article of Dissolution:

Upon dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for public purpose preferably to an exempt organization serving the needs of individuals with visual impairments in the the state of Florida.

The date of each amendment(s) adoption: 11-2-12			
Effe	Effective date if applicable: 11-2-12		
	(no more than 90 days after amendment file date)		
Ado	option of Amendment(s) (CHECK ONE)		
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.		
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.		
	Dated 11-2-12 Signature		
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been spected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)		
	Kalisha Eagle		
	(Typed or printed name of person signing)		
	CEO		

(Title of person signing)