N06000004621

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Glimmer of Hop	e, Inc	
DOCUMENT NUM	ивек: <u>N06000004621</u>		
The enclosed Article	es of Amendment and fee are subm	itted for filing.	
Please return all con	respondence concerning this matter	to the following:	
		assin-Rouzeau	
	(Name of C	ontact Person)	
	Glimmer	of Hope, Inc	
	(Firm/	Company)	
	P.O.Bo	x 290836	
	(Ac	ldress)	, ,
	Davie	EL 22220	
	<u> </u>	FL 33329 and Zip Code)	
		-	
	info@glimm E-mail address: (to be used	erofhopeftl.org for future annual report notifica	ntion)
For further informat	ion concerning this matter, please	call:	
Patricia Joassin-	-Rouzeau	at (954) 284-434	5
(Nam	e of Contact Person)		ne Telephone Number)
Enclosed is a check	for the following amount made pay	yable to the Florida Department	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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	r Circle

Articles of Amendment to **Articles of Incorporation** of

Glimmer of Hope, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N06000004621 (Document Number of Corporation (if known)

TO KEN ON THE PARTY OF THE PART 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:

The new name must be distinguishable and abbreviation "Corp." or " Inc." <u>"Company</u>			corporated" or the
B. Enter new principal office address, if a	pplicable:	9600 Alcazar Lan	e
Principal office address <u>MUST BE A</u> STR.	<u>EET ADDRESS</u>)	Davie, FL 33324	
		 	
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		P.O. Box 290836	
(**************************************			
		Davie, FL 33329	nter the name of the
	or registered offic	e address in Florida, e	nter the name of the
D. If amending the registered agent and/o new registered agent and/or the new re	or registered office a	e address in Florida, e	nter the name of the
D. If amending the registered agent and/o new registered agent and/or the new re Name of New Registered Agent:	or registered office a	e address in Florida, e ddress:	, Florida
D. If amending the registered agent and/or new registered agent and/or the new registered of New Registered Agent:	or registered office a	e address in Florida, e ddress:	
D. If amending the registered agent and/onew registered agent and/or the new registered agent and/or the new registered Agent:	or registered office and egistered	ee address in Florida, eddress: rida street address) (City) Agent:	, Florida (Zip Code)

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
DPT	Clifford W. Rouzeau		7 Damara
DVPS	William Rouzeau Jr.		
D	Muriel F. Montalvan		
	ling or adding additional Articles, of ditional sheets, if necessary). (Be		
			
			. ,

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
DPT	Guy-Laine D. Mecklembourg	P.O. Box 290836 Davie, FI 33329	☑ Add □ Remove
<u>DVP</u>	Jacqueline Carmel Jastram	P.O. Box 290836 Davie, Fl 33329	☑ Add □ Remove
<u>s</u>	Miguelina Blanco	P.O. Box 290836 Davie, Fl 33329	☑ Add ☐ Remove
	nding or adding additional Articles, enter additional sheets, if necessary). (Be spec		

The date of each amendmen	t(s) adoption: January 4, 2010
Effective date <u>if applicable</u> :	(date of adoption is required) February 1, 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_2/4/	2010
Signature	Oi-
(By	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, of the court appointed fiduciary by that fiduciary)
	Guy-Laine D. Mecklembourg
	(Typed or printed name of person signing)
	President
	(Title of person signing)