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(Re	equestor's Name)	
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COVER LETTER

Division of Corporations		
NAME OF CORPORATION: The Hope Fi	ood Center, Inc).
DOCUMENT NUMBER: N0600004866	6	
The enclosed Articles of Amendment and fee are sub-	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Keneshia Haye		
	(Name of Contact Person	1)
	(Firm/ Company)	
3703 Maid Marian Circle		1
	(Address)	
Killeen, TX 76549		
	(City/ State and Zip Code	·)
dolevy44@yahoo.com		
E-mail address: (to be used	for future annual report i	iotification)
For further information concerning this matter, please	call:	
Keneshia Haye	254	449-5299 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	ertment of State:
\$35 Filing Fee \$\text{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)
Muiling Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

and the safety grades

October 5, 2012

KENESHIA HAYE 3703 MAID MARIAN CIRCLE KILLEEN, TX 76549

SUBJECT: THE HOPE FOOD CENTER INC.

Ref. Number: N06000004866

We have received your document for THE HOPE FOOD CENTER INC. and your check(s) totaling \$43.75. 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.

The document number of the name conflict is F07000004621 - HOPE ENTERPRISE INC.

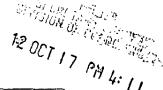
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 512A00024773

Articles of Amendment to Articles of Incorporation of



The Hope Food Center, Inc.	174
(Name of Corporation as currently filed with the Florida Dept. of State)	
N0600004866	
(Document Number of Corporation (if known)	<u></u>
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corp</i> amendment(s) to its Articles of Incorporation:	oration adopts the following
A. If amending name, enter the new name of the corporation:	
Hands Outstretched Pursuing Excellence Enterprises, Inc.	The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbi "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 na new registered agent and/or the new registered office address:	me of the
Name of New Registered Agent:	~
New Registered Office Address:	_
, Florida	a -
(City) (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 obligatio	ns of the position.
Signature of New Registered 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 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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Erica Levy	16944 S.W. 106 CT
Add			Miami, FL 33157
X Remove			
2) Change	VP	Horace Haye	3703 Maid Marian Cir
X	•		Killeen, TX 76549
Remove			
3) Change	<u>T</u>	Diana Williams	11771 S.W. 190 St
			Miami, FL 33157
X Remove		•	
4) Change	Т	Shavette Dotson	4404 Blueduck Dr
X			Killeen, TX 76549
Remove			
5) Change	S	Kadian Crowl	11460 S.W. 200 St
Add			Miami, FL 33157
X Remove			
6) Change	S	Leonard Watkis	11749 S.W. 212 St
X	***************************************		Miami, FL 33177
Remove		Page 2 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 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>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>T</u>	Jernell Rhodes	2606 Larissa Dr.
X Add			Killeen, TX 76549
Remove			·
2) Change	<u>s</u>	Shuanita Harris	21162 S.W. 112 St
X Add			Miami, FL 33189
Remove	S	Sonya Wilson	2710 Wesley Dr.
X Add	<u> </u>	Conya Wilson	Killeen, TX 76549
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Amending Article III Purpose: To provide instruction and training in social, charitable
and educational skills while providing assistance with nutritious foods, supplies,
and related services that will enable those who are disadvantaged to improve their
capabilities on subjects useful to them and the communities in which they live.
Through the aid of Hands Outstretched Pursuing Excellence Enterprises, Inc.
individuals will be able to become productive members of society.
Amending Article I Name: (Old) The Hope Food Center, Inc.
(New) Hands Outstretched Pursuing Excellence Enterprises, Inc.
,

The date of each am	endment(s) adoption: October 17, 2012
Effective date if app	licable: October 17, 2012
	(no more than 90 days after amendment file date)
Adoption of Amenda	ment(s) (CHECK ONE)
The amendment(was/were sufficient	s) was/were adopted by the members and the number of votes cast for the amendment(s) ent for approval.
	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.
Dated Signatu	
	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)
Ke	eneshia Haye
	(Typed or printed name of person signing)
· Pi	resident
	(Title of person signing)