

ND6000012420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

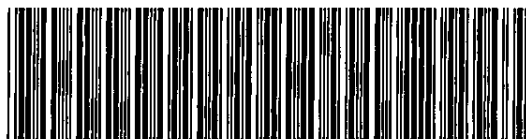
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600095125386

04/03/07--01019--025 \*\*43.75

FILED  
07 APR -3 AM 10:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend  
of

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Friends of Hope Adult Day Services Corp.

**DOCUMENT NUMBER:** N06000012420

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tony Gabrielle

(Name of Contact Person)

Board of Directors-Friends of Hope Adult Day Services

(Firm/ Company)

360 South Nine Drive

(Address)

Ponte Vedra, FL 32082

(City/ State and Zip Code)

For further information concerning this matter, please call:

Tony Gabrielle

(Name of Contact Person)

at ( 904 ) 285-2247

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |                                          |                                                                                   |                                                                                                     |                                                                                                                            |
|------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

**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  
to  
Articles of Incorporation  
of**

**Friends of Hope Adult Day Services Corp.**

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

FILED  
07 APR -3 AM 10:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**N06000012420**

(Document number of corporation (if known))

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:

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

**Article VIII-Purpose of Non-Profit**

No part of the net earnings of the organization shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons,

except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments

and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of the organization

shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in

or intervene (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office.

Notwithstanding any other provision of this document, the organization shall not carry on any other activities not permitted to be carried on

(a) by an organization exempt from federal income tax under section 501(c)3 of the Internal Revenue Code, or corresponding section of any

future federal tax code, or (b) by an organization, contributions to which are deductible under section 170 (c)2 of the Internal Revenue Code,

or corresponding section of any future federal tax code. The purpose of Friends of Hope Adult Services Corp. are solely those stated in Article III.

**Article IX- Dissolution of the Organization**

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)3

(Attach additional pages if necessary)  
(continued)

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 a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

The date of adoption of the amendment(s) was: March 27, 2007

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature Carol J. Neil  
(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.)

Carol Neil

(Typed or printed name of person signing)

President-Friends of Hope Adult Day Services Corp.

(Title of person signing)

**FILING FEE: \$35**