N0700005279

(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:

600210420016

anewa

08/01/11--01021--022 **43.75

FILED

2011 AUG -1 PH 3: 58

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Office Use Only

8/3/11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: HELP FOR T	HE HOMELESS, INC	
DOCUMENT NUM	BER: N07000005279		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	- Doro	othy Daniels	
		f Contact Person)	
	HELP FOR TI	HE HOMELESS, INC.	
	(Fim	n/ Company)	
	DOOT OF	THOE BOY 4000	
	· · · · · · · · · · · · · · · · · · ·	FICE BOX 1003 Address)	, 11 h11 ', · · · · · · · · · · · · · · · · · ·
		Address)	
	LAKE WALE	S, FLORIDA 33859	
		ate and Zip Code)	
		neless@yahoo.com ed for future annual report notif	inction)
	L-man address. (to be use	za for fature amidai report notri	ication)
For further information	on concerning this matter, pleas	se call:	
Danatha Daniala		000 000 44	240
Dorothy Daniels	of Contact Person)	at (863-) 632-12	· · · · · · · · · · · · · · · · · · ·
(Ivaille	of Contact Person)	(Area Code & Day	time Telephone Number)
Enclosed is a check f	or the following amount made	payable to the Florida Departme	ent of State:
■\$35 Filing Fee		☐ \$43.75 Filing Fee &	□ \$52.50 Filing Fee
_	Certificate of Status	Certified Copy	Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy
Matt	ng Address	C4	is enclosed)
	ng Address Idment Section	Street Address Amendment Section	
	ion of Corporations		
	Box 6327	Division of Corpora	LIONS
	nassee, FL 32314	Clifton Building 2661 Executive Cen	tor Circle
i allai	140500, 1 L J2J17	ZOUT EXCOUNTY CEN	

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

2011 AUG -1 PM 3: 58

HELP FOR THE HOMELESS, INC. SECRETARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State) N07000005279 (Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

e new name must be distinguishable at breviation "Corp." or "Inc." <u>"Compan</u>		rporated" or the
Enter new principal office address, if incipal office address MUST BE A ST		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applications and address MAY BE A POST O		
If amending the registered agent and new registered agent and/or the new		er the name of th
		er the name of th
new registered agent and/or the new	registered office address	er the name of th
<u>Name of New Registered Agent:</u>	registered office address	er the name of th

Page 1 of 3

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
D	CANDICE MONTFORD	211 EAST POLK AVENUE LAKE WALES, FLORIDA 33853	☑ Add □ Remove
<u>D</u>	BRITTANY DANIELS	102 WEST BULLARD AVENUE LAKE WALES, FLORIDA 33853	☑ Add ☐ Remove
<u>D</u>	CIERRA DANIELS	102 WEST BULLARD AVENUE LAKE WALES, FLORIDA 33853	☑ Add ☐ Remove
	ng or adding additional Articles, ente ditional sheets, if necessary). (Be spec		

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>D</u>	AMIT KARR	2621 GALLIANO CIRCLE WINTER PARK, FLORIDA	_ □ Add _ ☑ Remove
V	JAMES PROZAZNIK	32792 1103 MAMLET DRIVE	— ☐ Add
		MAITLAND, FLORIDA 32751	_ =
D	ROSA MONTFORD	211 EAST POLK AVENUE LAKE WALES, FLORIDA 33853	
E Ifamend	ling or adding additional Articles,	enter change(s) here:	
(attach ad	dditional sheets, if necessary). (Be	e specific)	
<u> </u>			
	, , , , , , , , , , , , , , , , , , ,		
	····		

-			

<u>Title</u>	<u>Name</u>	Address	Type of Action
D	EMILY KILLIAN	1000 HOLT AVENUE,BOX 1665 WINTER PARK,FL 32789	☐ Add ☑ Remove
<u>D</u>	SAMATHA MARSH	905 BURNSIDE AVENUE,#2 EAST HARTFORD,CT 06108	☐ Add ☑ Remove
<u>D</u>	ROB YOHO	3630GREAT MASTERPIECE REL	☐ Add ☑ Remove
(attach ad	ling or adding additional Additional Additional sheets, if necessary ANIELS (VICE PRESID		
		· · · · · · · · · · · · · · · · · · ·	
		No. 1 and 1	
- ,			
		,	

Title Name <u>Address</u> **Type of Action** JUDY FLANOGAN D 1620 HIGHLAND BOULEVARD ☐ Add 32798 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendmen	t(s) adoption: _^-	10-2011
Effective date <u>if applicable</u> :	4-15-2011	(date of adoption is required)
	(no mor	re than 90 days after amendment file date)
Adoption of Amendment(s)	(СН	IECK ONE)
The amendment(s) was/wewas/were sufficient for app	•	members and the number of votes cast for the amendment(s)
There are no members or adopted by the board of di		to vote on the amendment(s). The amendment(s) was/were
hav	the chairman or ye not been selected	vice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or if fiduciary by that fiduciary)
	(Ту	Dorothy Daniels ped or printed name of person signing)
		Secretary
		(Title of person signing)

Page 3 of 3