

107 00000 8888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

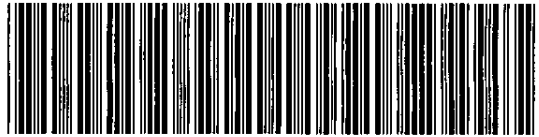
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

File 12/17
need to connect
sent 12/23

Office Use Only



600137466276

12/24/08--01046--002 **43.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 DEC 17 PM 12:17

FILED

cc

@

Amend
DPL 12/23

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Hope 9 faith Ministries, INC

DOCUMENT NUMBER: N 0700000088888

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

Please return all correspondence concerning this matter to the following:

Jose Angel Rivera
(Name of Contact Person)

Hope 9 faith Ministries, INC
(Firm/ Company)

24401 SW 217th Ave
(Address)

Homestead, FL 33031
(City/ State and Zip Code)

For further information concerning this matter, please call:

Jose Angel Rivera at (305) 242-2870
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable 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)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 3, 2008

JOSE ANGEL RIVERA
HOPE & FAITH MINISTRIES, INC.
24401 SW 217TH AVENUE
HOMESTEAD, FL 33031

SUBJECT: HOPE & FAITH MINISTRIES INC.
Ref. Number: N07000008888

We have received your document for HOPE & FAITH MINISTRIES INC. and check(s) totaling \$43.75. However, your check(s) and document are being returned for the following:

AS STATED IN OUR LAST LETTER, ARTICLES OF CORRECTION ONLY CORRECT A DOCUMENT THAT WAS FILED WITHIN THE LAST 30 DAYS. THIS IS NOT THE CASE. ARTICLES OF AMENDMENT MUST BE FILED TO MAKE CHANGES, ADDITIONS OR DELETIONS. PLEASE USE THE ENCLOSED FORM AND RESUBMIT THE CHECK.

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) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 708A00059059

RECEIVED
2008 DEC 17 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 17, 2008

JOSE ANGEL RIVERA
HOPE & FAITH MINISTRIES, INC.
24401 SW 217TH AVENUE
HOMESTEAD, FL 33031

SUBJECT: HOPE & FAITH MINISTRIES INC.
Ref. Number: N07000008888

We have received your document for HOPE & FAITH MINISTRIES INC. and check(s) totaling \$43.75. However, your check(s) and document are being returned for the following:

Your check is being returned as it is not payable to this office. Please make your check payable to the Secretary of State and return it in order to complete your filing.

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 408A00057380

RECEIVED
2008 DEC -2 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Hope F. Faith Ministries, INC

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

(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:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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**)

24401 SW 217th Ave

Homestead, FL 33031

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

José Angel Rivera

New Registered Office Address:

24401 SW 217th Ave

(Florida street address)

Homestead

(City)

Florida 33031

(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 obligations of the position.

Signature of New Registered Agent, if changing

FILED
08 DEC 17 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Under Penalties of Perjury I declare that I have Examined this information, including accompanying documents and, to the best of my knowledge and belief, the information contains, all the relevant facts. Relating ~~to the request~~ to the request for the information, and such facts, are true, correct, and complete. Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, the making of distributions to the organizations that qualify as exempt organization under 501 (c) (3) of the internal Revenue Code, or corresponding section of future tax code.

The date of each amendment(s) adoption: _____

12/2/08

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(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 _____

12/15/08

Signature _____

(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)

Jose Angel Rivera

(Typed or printed name of person signing)

President

(Title of person signing)