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TO: Amendment Section Division of Corporations

INSPIRE GROUP IS NAME OF CORPORATION:	NC		
N07000008965			
DOCUMENT NUMBER:		·	
The enclosed Articles of Amendment and fee are subt	nitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
HILLARD GOLDSMITH			
	(Name of Contact Pers	son)	
JP GOLDSMITH FINANCIAL SERVICES INC			
	(Firm/ Company)		
644 W BREVARD ST			
	(Address)		····-
TALLAHASSEE, FL 32304			
	(City/ State and Zip Co	ode)	
E-mail address: (to be used	for future annual repor	rt notification	1)
For further information concerning this matter, please	call:		
HILLARD GOLDSMITH		850-692-2647	7
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida De	epartment of	State:
\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certiti Certiti	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section		et Address ndment Secti	on
Division of Commentions	1356	in a comme	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

INSPIRE GROUP INC

(Name of Corporation as currently filed with the Florida I	Dept. of State)		
N07000008965			
(Document Numb	er of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation	adopts the	following
A. If amending name, enter the new name of the corporat	<u>ion:</u>		
EMPOWERING HOPE INCH!	HOPE OF TAMAHASSEE INC		The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviatio	n "Corp."	or "Inc."
B. Enter new principal office address, if applicable:	N/A	'	2025
(Principal office address MUST BE A STREET ADDRESS		-	025 HAR
			1 ,
			о - -
C. Enter new mailing address, if applicable:			PH I
(Mailing address MAY BE A POST OFFICE BOX)			12:-
	-	····	_2
D. If amending the registered agent and/or registered office	oo addusse in Florida annually and a	1	
new registered agent and/or the new registered office a	ddress:	<u>ne</u>	
Name of New Registered Agent: N/A			
	(Florida street address)		.
New Registered Office Address:	(riorial sireel address)		
	, Flori	da	
		o Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: niliar with and accept the obligations of the	e position.	
	(N)		
NI,	gnature of New Registered Agent, if changi	ne	

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 Do V Mike Jo SV Sally Sı	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			N/A
Remove			
2) Change Add			
Remove 3) Remove Add Remove	 		
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee.	g additional Arti ts, if necessary).	cles, enter change(s) here: (Be specific)	
N/A	-		
	*- - -		

		
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-		<u></u>
The date of each amendment(s) adopted date this document was signed.	ion:	, if other than the
Effective date if applicable:		
Meetive date if applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Departs	oes not meet the applicable statutory filing requirements, this date will not ment of State's records.	be listed as the
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.

Dated	MARCH 6, 2025
Signatur	
	(By the chairman of 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)
	AVERY CURRY
	(Typed or printed name of person signing)
	DIRECTOR