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(Re	equestor's Name)	
. (Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
· (Bu	ısiness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Hunger Fre	e Mission for Christ, Inc.
DOCUMENT NUMBER: NO 70000	9119
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
Patricia Swind (Name of Conta	ct Person)
Hunger Free Missi	on for Christ, Inc.
3420 S 70th St (Addres	s)
Tampa, FL 336 (City/ State and	Zip Code)
For further information concerning this matter, please	call:
Patricia Swindle a (Name of Contact Person)	
Enclosed is a check for the following amount made pa \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & S52.50 Filing Fee
Amendment Section A Division of Corporations D P.O. Box 6327 C	treet Address mendment Section ivision of Corporations lifton Building 661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

Hunger Free Mission for Christ, Inc.

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

NOTODOO 919

(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:

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)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Tampa, FL 331619

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:

New Registered Office Address:

(Florida street address)

Tampa

Florida 331619

New Registered Agent's Signature, if changing Registered Agent:

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

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

. 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) <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** Gregory Jubert
Gladus Niles ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 5109
Effective date if applicable: (no more than 90 days after amendment file date)
(no more man so days after amenanem fire adde)
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 5/1/09 Signature Patricia Smill
(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, of other court appointed fiduciary by that fiduciary)
Patricia Swindle (Typed or printed name of person signing)
(Title of person signing)

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