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TO; Amendment Section Division of Corporation	ıs				Cotton of the control
NAME OF CORPORATION	LOVE AND HOPE II	N ACTION, INC.			
DOCUMENT NUMBER:	N08000000214				
The enclosed Articles of Am	endment and fee are subm	nitted for filing.			
Please return all corresponde	ence concerning this matte	r to the following:			
JOHN SHERRARD					
		(Name of Contact Pe	rson)		
		(Firm/ Company	')		
34 SE 5TH STREET					
		(Address)			
STUART, FL 34994					
	•	(City/ State and Zip (Code)		
jesesq@bellsouth.net					
E	-mail address: (to be used	for future annual rep	ort notification	i)	
For further information conc	terning this matter, please	call:			
John Sherrard		at	772	283-9322	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Nu	ımber)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida I	Department of	State:	
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Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

•		Cons.
		3,
Ar	ticles of Amendment to	
. Arti	icles of Incorporation	
	of	
LOVE AND HOPE IN ACTION, INC.		
Name of Corporation as currently filed with the Flori	da Dept. of State)	
N08000000214		
(Document No	umber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not I	For Profit Corporation adopts the following
. If amending name, enter the new name of the corpo	oration:	
	<u>.</u>	The ne
ame must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	oration" or "incorporat	ted" or the abbreviation "Corp." or "Inc.
 Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE 	F CC)	
The par office address most no regree to the	<u></u>	<u></u>
	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
). If amending the registered agent and/or registered	office address in Floric	da, enter the name of the
new registered agent and/or the new registered offi		
Name of New Registered Agent:		
· ·		
		(Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:	
hereby accept the appointment as registered agent. I a		ept the obligations of the position.
	01	
	 Signature of New Reg 	istered 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)

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add		<u> </u>	
Remove			
2) Change Add		<u> </u>	
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add		-	
Remove			
		unal Articles, enter change(s) here: essary). (Be specific)	
Article III shall be amend	led in its	entirety as follows:	
ARTICLE III - PURPOS	E - Love	and Hope in Action. Inc. is organized as an indepen	dent, nondenominational church under
the laws of the State of F	lorida, ex	clusively for religious and charitable purposes, and	has 501(c)(3) status from the United
States Internal Revenue S	Service. T	he purpose of the organization is to meet the spiritu	al and physical needs
of those seeking the servi	ices of the	e organization	

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The date of each amendment(s) adopti- date this document was signed.	on:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	pes not meet the applicable statutory filing requirements, this date will not learn of State's records.	oe listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.
Dated	May 12, 2020
Signatu	(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)
	John Sherrard (Typed or printed name of person signing)
	Chairman
	(Title of person signing)