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(Re	equestor's Name)	= ",
(Ac	ldress)	
(Ac	ldress)	<u> </u>
(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>Ernie Sims Big H. I. T. S. Foundation</u> , Inc
DOCUMENT NUMBER: N 08 000003805
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Alice B. Sims (Name of Contact Person)
Ernie Sirns Big H. I.T. S Foundation (Firm Company)
1770 Newman Lane (Address)
Tallahassee, Florida 32312 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alice B. Sims at 850 - 322 - 3929 (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 & ☐ \$43.75 Filing Fee & ☐ £52.50 Filing Fee Certificate of Status (Additional copy is enclosed) ☐ Example Certificate of Status (Additional Copy is Enclosed)

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

Amendment Section
Division of Corporations

Street Address

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILEC 2021 NOV -9 AM

(Name of Corporation as currently filed with the Flor	ida Dept. of State)	SECRETARY O TALLAHASSEE
N680000		MCC 11
(Document N	lumber of Corporation (if	f known)
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
name must he distinguishable and contain the word "borp" "Company" or "Co." may not be used in the name.	U.I.T.S. Food	rhe new ted" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Floridice address:	la, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		, Florida (Zip Code)
New Registered Agent's Signature, if changing Registe	(City) ered Agent:	
hereby accept the appointment as registered agent. Lar	m familiar with and acce _l	pt the obligations of the position.
	Signature of New Regi	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	V Mike	Doe Flores Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change Add	CEO	Ernie Sims III	1032 Metcalf Rd Thomasville, Gra.
2) Remove 2) Change Add	ED_	Emie Sims, Jr.	31792 1770 Newman Lane Tallahassee, Fl.
Remove			32317_
4) Change Add			
Remove 5/ChangeAdd			
Remove 6)ChangeAdd			
E. If amending or add (attach additional sh	ling additional A acts, if necessary)	rticles, enter change(s) here: (Be specific)	

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The date of each amendment(s) addate this document was signed.	option;		, if other than the
Effective date if applicables			
	(no more than 90 days after amer	ndment file date)	
	ck does not meet the applicable statutor		ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ac was/were sufficient for approve	opted by the members and the number l.	of votes east for the amendm	ent(s)

ŪZ	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
	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) Ernie Sims, JR
	(Typed or printed name of person signing)
	Executive Director (Title of person signing)