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Amend/M



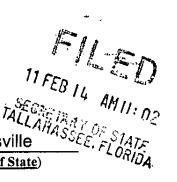
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Helping Hands	Charity Foundation Inc.	of Gainesville
DOCUMENT NU	MBER: N08000006420		
The enclosed Artica	les of Amendment and fee are subm	itted for filing.	•
Please return all co	rrespondence concerning this matter	to the following:	
· 	Antoni	o DeSue	
	(Name of C	ontact Person)	
	(Firm/ (Company)	
	1104 NE 2	25th Terrace	
	(Ad	dress)	•
		Florida 32641	. <u> </u>
	(City/ State	and Zip Code)	
	mindesue(E-mail address: (to be used to	@yahoo.com for future annual report notificati	on)
For further informa	tion concerning this matter, please c	all:	
Antonio Desue		at (352) 281-0739	•
(Nan	ne of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check	for the following amount made pay	able to the Florida Department of	of State:
 	☐ \$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 C Tallahassee, FL 32301	

Articles of Amendment to **Articles of Incorporation** of



Helping Hands Charity Foundation Inc. of Gainesville (Name of Corporation as currently filed with the Florida Dept. of State) N08000006420 (Document Number of Corporation (if known)

		orts Foundation INC.
e new name must be distinguishable and previation "Corp." or "Inc." <u>"Company"</u>		"corporation" or "incorporated" or the the the used in the name.
Enter new principal office address, if a	pplicable:	2106 NE 8th Ave
incipal office address <u>MUST BE A STRE</u>	SET ADDRESS)	Gainesville Florida
Enter new moiling address if ar-lical	lo.	
- cares new maning annress il annican		
Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF		P.O Box 5324
		P.O Box 5324 Gainesville Florida 32627
(Mailing address MAY BE A POST OFI If amending the registered agent and/or new registered agent and/or the new re-	r registered office	Gainesville Florida 32627 address in Florida, enter the name of the
(Mailing address MAY BE A POST OF I If amending the registered agent and/or	r registered office gistered office Ant	Gainesville Florida 32627 address in Florida, enter the name of the dress: conio DeSue
(Mailing address MAY BE A POST OF I If amending the registered agent and/or new registered agent and/or the new re-	r registered office gistered office add	Gainesville Florida 32627 address in Florida, enter the name of the dress:
(Mailing address MAY BE A POST OFI If amending the registered agent and/or new registered agent and/or the new registered Agent:	r registered office gistered office add	Gainesville Florida 32627 address in Florida, enter the name of the dress: conio DeSue NE 25th Terr ida street address)
(Mailing address MAY BE A POST OFI If amending the registered agent and/or new registered agent and/or the new registered Agent:	r registered office gistered office add	Gainesville Florida 32627 address in Florida, enter the name of the dress: conio DeSue NE 25th Terr ida street address)

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) **Type of Action** Title Name | Address PD Antonio DeSue 1104 NE 25th Terrace ✓ Add Gainesville Florida 32641 ☐ Remove Mitchell Taylor D 1271 SE 11th Ave Gainesville Florida 32641 ☐ Remove S Laronda Ivey 1918 SE 15th ave ☐ Remove Gainesville Florida 32641 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Amending Articles

Article of Amendment

Helping Hands Charity Foundation Inc. of Gainesville

A FLORIDA CORPORATION NOT FOR PROFIT

Article One

The name of the corporation is:

Gainesville Dolphins Youth Sports Foundation 20c.

Article Two

The principal place of business address is:

2106 NE 8th Ave Gainesville Florida

The Mailing address of the corporation is:

P.O Box 5324 Gainesville Florida 32627

Article Three

The Specific Purpose for which this corporation is organized is:

This Corporation is organized exclusively for one or more of the purposes as specified in the Section 501 (c) (3) of the Internal Revenue Code.

SPECIFIC OBJECTIVES AND PURPOSES

The mission of the Gainesville Dolphins youth Sports foundation is to provide social, recreational and educational programs to its member teams and the residents of the State of Florida. It also hopes to achieve community pride and cohesiveness and decrease prevalent problems in the low-income community such as juvenile crime, teen pregnancy and drug activity.

The specific objectives and purposes of this corporation shall be: To provide a safe haven for low-income youth and give them an alternative to the streets through the implementation of a youth athletic program.

- 1) To implement a mentoring program between enrolled youths and coaches.
- 2) To provide an avenue for positive interaction and leadership development for youth through participant in competitive athletic programs.
- 3) To increase community cohesiveness by implementing ongoing community service projects and social events for youth.

Article Four

The manner in which directors are elected or appointed:

The Board of Directors is the group of persons vested with the responsibility to manage the business and the affairs of this Corporate subject to the law, the Articles of Incorporation and these Bylaws.

Directors shall be elected by the members vested with voting rights at the annual meeting of the membership. Executive Directors shall serve one term unless re-elected to a successful succeeding terms.

The date of each amendment(s)	adoption: 1/26/2011
Effective date <u>if applicable</u> :	(date of adoption is required)
-	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or me adopted by the board of directions.	mbers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated 2/3/20 Signature	11 Whence Ossue: The chairman of the board, president or other officer-if directors
have i	not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Antonio DeSue
	(Typed or printed name of person signing)
	President/ Registered Agent
	(Title of person signing)