

N08000007124

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NO + Amend
* 00
11/20/08

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Eureka Family Center, Inc.

DOCUMENT NUMBER: N08000007124

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John D. Corse

(Name of Contact Person)

BMLR Properties, Inc.

(Firm/ Company)

4000-B St. John's Avenue, Suite 22

(Address)

Jacksonville, FL 32205

(City/ State and Zip Code)

For further information concerning this matter, please call:

John D. Corse

(Name of Contact Person)

at (904) 477-4295

(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 &
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 Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

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

Eureka Family Center, Inc.

(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:

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

Helping Hands Neighborhood Network Center, Inc.

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**)*

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)

_____, Florida
(City) (Zip Code)

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

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

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TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
Director	<u>Mark Hulsey</u>	<u>621 Forest Park Blvd</u> <u>St. Augustine, FL</u> <u>32002</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Director	<u>William H. Adams</u>	<u>10166 Village Grove</u> <u>Jacksonville, FL</u> <u>32257-6250</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Director	<u>Rogers Holmes</u>	<u>1253 Southshore Dr.</u> <u>Orange Park, FL</u> <u>32203-7014</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Article III Purpose is amended to read as follows:

"The purposes for which the corporation is organized are
exclusively for charitable and educational purposes within
the meaning of section 501 (c)(3) of the Internal Revenue Code
or the corresponding section of any future United States
Revenue Law including the education and development of
children, families and other residents of low income
subsidized housing projects and the residents of their
surrounding neighborhoods."

The date of each amendment(s) adoption: October 30, 2008

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 November 6, 2008

Signature John D. Corse
(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 D. Corse
(Typed or printed name of person signing)

Vice-President
(Title of person signing)