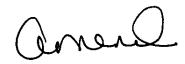
N0800007166

(Re	questor's Name)	
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1009 61009

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	ORATION: United Hope All	lance Corp.	
DOCUMENT NUM	мвек: <u>N0800007166</u>		
The enclosed Article	es of Amendment and fee are subm	itted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
		Paduano	
	(Name of C	ontact Person)	
	(Firm/ (Company)	
		re Lake Blvd.	
	(Ad	dress)	
		le, FL 32256	
	(City/ State	and Zip Code)	
	E-mail address: (to be used to	for future annual report noti	fication)
For further informat	ion concerning this matter, please c	all:	
Laurie Hammert	pacher	_ at (904) 465-5	
(Nam	e of Contact Person)	(Area Code & Da	ytime Telephone Number)
Enclosed is a check	for the following amount made pay	rable to the Florida Departm	nent 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)
	ling Address	Street Address	,
	endment Section	Amendment Section	
		Division of Corpor Clifton Building	ations
	ahassee, FL 32314	2661 Executive Ce	nter Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

FILED

2009 JUN -5 PM 1: 01 United Hope Alliance Corp. (Name of Corporation as currently filed with the Florida Dept. TAState ASSEE. FLORIDA N08000007166 (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:

e new name must be distinguishable ar breviation "Corp." or " Inc." <u>"Compan</u>		
Enter new principal office address, if incipal office address MUST BE A STA		
Enter new mailing address, if applications and address MAY BE A POST O		
		ida, enter the name of the
If amending the registered agent and new registered agent and/or the new Name of New Registered Agent:		ida, enter the name of the
Name of New Registered Agent:	registered office 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)

<u>Title</u>	Name	Address	Type of Action
D	Duke Budlong	7700 Square Lake Blvd. Jacksonville, FL 32256	
<u>D</u>	Roger G Wadford	7700 Square Lake Blvd. Jacksonville, FL 32256	
E. If amend (attach ad	ling or adding additional Articles, dditional sheets, if necessary). (Be	enter change(s) here: e specific)	

The date of each amendment(s) adoption: 6-2-09		
Effective date if applicable:	• • • •	
	more than 90 days after amendment file date)	
, , , , ,		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) l.	
There are no members or mem adopted by the board of directo	bers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated_06/02/09	9 1 1 1	
Signature	M Fd	
have no	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator — if in the hands of a receiver, trustee, ourt appointed fiduciary by that fiduciary)	
	Robert Paduano	
_	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	

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