N19000002444

* 1	(Requestor's Name)
*	
, ' ',''	-
• •	(Address)
	(A.I.I)
	(Address)
	•
	(City/State/Zip/Phone #)
	(City/State/Zip/Filone #)
PICK-UF	P
•	<u> </u>
	(Business Entity Name)
•	
	(Document Number)
•	
•	
·	
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer
, chooler mondoner	to i milg officor,
	ļ
1	j
	_
ě	
<u> </u>	·

Office Use Only



400175103934

04/12/10--01028--005 **35.00

AND JUN -4 AM 9: 48
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Amend

TR

INN - 7 2010

« COVER LÉTTER

TO: Amendment Section Division of Corporations

NAME OF CORP	AME OF CORPORATION: INNOVATIVE CHARITY, INC.				
DOCUMENT NU	CUMENT NUMBER: N0900002444				
The enclosed Article	les of Amendment and fee a	are submitted for filing.			
Please return all co	rrespondence concerning th	is matter to the following:			
-		JAY PARK			
	ľ	Name of Contact Person			
	INNO	VATIVE CHARITY INC.			
		Firm/ Company			
_	2524 E	E SUNRISE BLVD. # 98			
Address					
·_	FORT LAU	DERDALE, FLORIDA 33304			
	. (City/ State and Zip Code			
	HIJHF E-mail address: (to be use	P@YAHOO.COM ed for future annual report notification)			
For further informa	tion concerning this matter,	, please call:			
	JAY PARK	at (917)66	69-0566 		
Name	of Contact Person	Area Code & Daytime Tele	ephone Number		
Enclosed is a check	for the following amount r	nade payable to the Florida Depart	ment of State:		
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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	e		

Tallahassee, FL 32301

June 2, 2010

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Subject: Innovative Charity, Inc. Ref. Number: N09000002444

Dear Ms. Brown:

We received your letter dated May 25th, 2010 a few days after mailing the correct form #617.1006. Your letter states that a copy of your letter must be returned with the document, but we did not have the letter or the instructions at the time of our mailing. We are submitting a copy of our document along with the correct filing form and hope this does not confuse the process.

Please contact me if you have any questions.

Thank you!

Sincerely,

Susan Rundlett

Administrative Assistant



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 25, 2010

LIVING HOPE HAITI ATTN: SUE RUNDLETT 9200 S DADELAND BLVD STE 214 MIAMI, FL 33156

SUBJECT: INNOVATIVE CHARITY, INC.

Ref. Number: N09000002444

We have received your document for INNOVATIVE CHARITY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

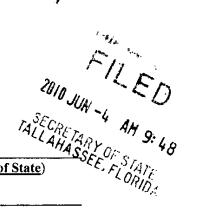
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 810A00009050

Articles of Amendment to Articles of Incorporation of



1

(Name of Corporation as currently filed with the Florida Dept. of State)
INNOVATIVE CHARITY, 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:

The new name must be distinguishable and co	NA	
bbreviation "Corp." or " Inc." <u>"Company" or</u>		
B. Enter new principal office address, if applicable:		12741 MIRAMAR PARKWAY
Principal office address <u>MUST BE A STREE</u>	<u>TADDRESS</u>)	STE 204
		MIRAMAR, FLORIDA 33027
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		12741 MIRAMAR PARKWAY
		STE 204
		MIRAMAR, FLORIDA 33027
o. If amending the registered agent and/or renew registered agent and/or the new regis		
Name of New Registered Agent:		
	12741 MIRAI	MAR PKWY. STE 204
		MAR PKWY. STE 204 ida street address)
	(Flori	

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
			☐ Add ☐ Remove
			La Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	s or adding additional Articles, enter chional sheets, if necessary). (Be specific		
TO SUPPOR	RT AND CREATE CHARITABLE P	ROJECTS FOR CHARITAB	LE
NON-PROFI	T AND RELIGIOUS ORGANIZATI	ONS. ALL ACTIVITIES WIL	L BE
LIMITED TO	CHARITABLE AND RELIGIOUS	PURPOSES, AS DESCRIBE	ED IN
SECTION 50	o1(c)(3).		

	A Company of the Comp		
·			
		<u> </u>	
	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

The date of each amendmen	t(s) adoption: APRIL 8, 2010
Effective date <u>if applicable</u> :	(date of adoption is required) APRIL 8, 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	are adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_APF	RIL 8, 2010
Signature	Cal Halun
(By	the chairman of vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	CALVIN H. BABCOCK
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)