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SECRETARY OF STATE TALL AHASSEF, FLORID.

Molo

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: HUGS Human	Services	
DOCUMENT NUMI	BER: <u>NO 9000</u>	005491	
The enclosed <i>Articles</i>	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this matt	ter to the following:	
		ny Milton	
	(Name of	Contact Person)	
	HUGS Hun	nan Services, Inc.	
	(Firm	/ Company)	
	1307 N.T	uttle Ave.	
	(/	attle Ave.	
	Caraca	. El 24227	
		ta, FL 34237 te and Zip Code)	
		•	
	E-mail address: (to be use	d for future annual report notifica	ition)
For further informatio	n concerning this matter, please	e call:	
Tony Milton, CEO	of Contact Person)	at (941) 539-238	2 ne Telephone Number)
•	•	,	•
Enclosed is a check for	or the following amount made p	ayable 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		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporation Clifton Building	ns
Tallahassee, FL 32314		2661 Executive Center Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



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

N0900005491

(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 cont	ain the word "cornoration" or	"incorporated" or the
abbreviation "Corp." or "Inc." "Company" or "		
3. Enter new principal office address, if applic	able·	- -
Principal office address <u>MUST BE A STREET</u>		
		_
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<i>BOX</i>)	
	-	-
		· · · · · · · · · · · · · · · · · · ·
). If amending the registered agent and/or reg		a, enter the name of the
$r_0 = r_0$ sistered agent and/or the new registe	red office address:	
Name of New Registered Agent:		
Name of New Registered Agent:		
Name of New Registered Agent: - New Registered Office Address:	(Florida street address)	
-	(Florida street address)	
-	(Florida street address) (City)	
New Registered Office Address:	(City)	
New Registered Office Address:	(City)	
New Registered Office Address:	(City)	(Zip Code)

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>	Type of Action	
				Add Remove	
					
					
¥	(attach	additional sheets, if neces	• • •		
	a. Said c	organization is organiz	zed exclusively for charitable, religious	s, educational,	
and scientific purposes, including, for such purposes, the making of distribution				distributions to	
organizations that qualify as exempt organizations under section 501		1(c) (3) of the			
	Internal Revenue Code, or corresponding section of any future federal tax code.				
	b. Upon	the dissolution of the	organization, assets shall be distribute	ed for one or more	
	exempt p	ourposes within the m	eaning of section 501(c) (3) of the Inte	ernal Revenue Code,	
	or corres	ponding section of ar	ny future federal tax code, or shall be c	listributed to the federa	
	governm	ent, or to a state or lo	ocal government, for a public purpose.	Any such assets not	
	disposed	l of shall be disposed	of by the Court of Common Pleas of	the county in which the	
	principal	office of the organiza	ation is then located, exclusively for su	ch purposes or to	
	such org	anization or organiza	tions, as said Court shall determine, w	hich are organized and	
	operated	l exclusively for such	purposes.		
			· · · · · · · · · · · · · · · · · · ·		
			· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s	adoption: January 25, 2010
•	(date of adoption is required)
Effective date <u>if applicable</u> :	(
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were was/were sufficient for appro	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 direct	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated Febru	ary 5, 2010
Signature	
have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, o court appointed fiduciary by that fiduciary)
	Tony Milton
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)