Division of Corporations Electronic Filing Cover Sheet

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From:

: LAZARUS CORPORATE FILING SERVICE, INC. Account Name

Account Number : I20000000019 Phone : (305)552-5973 Fax Number 2 (305)220-1440

*Enter the email address for this business entity to be used for future Channual report mailings. Enter only one email address please. **

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

HEALING HANDS FOUNDATION, INC.

Certificate of Status 0 Certified Copy 0 Page Count 05 Estimated Charge

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PAGE 02/06

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March 22, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

HEALING HANDS FOUNDATION, INC. 8181 NW 36 ST SUITE 1007

DORAL, FL 33166

SUBJECT: HEALING HANDS FOUNDATION, INC.

REF: N09000009935

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Period after (INC) in the corporate name.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H10000062874 Letter Number: 110A00006924 J

Articles of Amendment to

Articles of Incorporation

•	ΟX	يمس
Healing HANDS	Foundation.	Inc. 5 3 22
(Name of Corporation as curr	ently filed with the Florida D	ept. of State)
NOGOOO	00 9935	22
	mber of Corporation (if known)	
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of I		Not For Profit Corporation adopts
A. If amending name, enter the new name of	of the corporation:	
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company" of B. Enter new principal office address, if ap	or "Co." may not be used in th	
(Principal office address MUST BE A STRE	ET ADDRESS)	
ı		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
	·	
		
D. If amending the registered agent and/or	registered office address in F	orida, enter the name of the
new registered agent and/or the new reg	istered office address:	•
Name of New Registered Agent:		
New Registered Office Address:	(Florida street addi	ess)
		Florida
	(City)	Florida, Florida
New Registered Agent's Signature, if change I hereby accept the appointment as registered position.	ing Registered Agent:	and accept the obligations of the
` <u> </u>		WF
i	Signature of New Registered Ag	ent, if changing
•	Page 1 of 3	

H10000062874

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	(Be specific) lowing ARTICLES boration:

HEALING HANDS FOUNDATION

Article 10 No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, directors, officers or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of Section 501 (c)(3) purposes. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

Article 11 Not withstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from Federal income tax under Section 501 (c) (3) of the Internal Revenue Code (or corresponding section of any future Federal tax code) or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code (or corresponding section of any future Federal tax code.)

Article 12 Upon dissolution of this corporation assets shall be distributed for one or more exempt purposes within the meaning of Section 501 (c) (3) of the Internal Revenue Code, i.e. charitable, educational, religious or scientific, or corresponding section of any future Federal tax code, or shall be distributed to the Federal government, or to a state or local government for a public purpose.

CHANGE ARTICLE III PURPOSE TO:

Charitable organization, health events, education. To provide emergency funds, clothing, food. To transact in any and lawful business.

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The date of each amendment(s) adoption	s: <u>3-19-10</u>		
•	(date of adoption is required)		
Effective date <u>if applicable</u> :	4 00 1 A 4 (01 T 4)		
(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes east for the amendment(s)		
There are no members or members enti- adopted by the board of directors.	itled to vote on the amendment(s). The amendment(s) was/were		
Dated3	19/10		
Signature	Boladel		
	n or vice chairman of the board, president or other officer-if directors		
	elected, by an incorporator — if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)		
	naviella Ranel (Typed or printed name of person signing)		
	Presinent		
	(Title of person signing)		

Page 3 of 3