# N100001167

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800166260898

02/08/10--01044--008 \*\*35.00

2010 FEB -8 PM 4: 06
SECRETARY OF STATE

8089/10

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Helping Amer	icas Ve	terans E	verywhere	, Inc.
DOCUMENT NUM	IBER: N10000001167				
The enclosed Article	s of Amendment and fee are sul	omitted for	filing.		
Please return all corr	espondence concerning this mat	ter to the f	ollowing:		
		my Chav			
	(Name of	Contact P	erson)		
<del></del>	Helping Americas \		<del></del>	ere, Inc.	<del>,,</del>
	(Firm	n/ Compan	y)		
		eymouth	Drive		
	(	Address)			
		Florida			
	(City/ Sta	ite and Zip	Code)		
	WeAreHA E-mail address: (to be use			port notification	n)
For further informati	on concerning this matter, pleas	e call:			
Tammy Chavez		at (	386 )	873-5535	
(Name	e of Contact Person)		(Area Coo	le & Daytime	Telephone Number)
Enclosed is a check i	for the following amount made p	payable to	the Florida	Department of	State:
<b>☑</b> \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	Certif	3.75 Filing lied Copy tional copy sed)		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address ndment Section		Street Ad	dress nt Section	
	sion of Corporations			of Corporations	
P.O.	Box 6327		Clifton Bu	uilding	
Talla	hassee, FL 32314		2661 Exec	cutive Center Ci	тele

Tallahassee, FL 32301

### **Articles of Amendment** to

F	IL	E	D
2010 FEB	-8	PΗ	4: na

Article	s of incorporation	2010 -	
•	of	ZUIUF	EB -8 PM 4: (
Helping Americas Ve	eterans Everyw	here, Inc <i>SECRE</i>	THEN .
(Name of Corporation as curren	tly filed with the Flo	rida Dept. of Stare	ASSEF STATE
N1000	00001167		ביי בטאום
	er of Corporation (if	known)	<del> </del>
rsuant to the provisions of section 617.1006, Flee following amendment(s) to its Articles of Income		lorida Not For Pro	fit Corporation a
If amending name, enter the new name of t	he corporation:		
ne new name must be distinguishable and con breviation "Corp." or "Inc." "Company" or "			porated" or the
Enter new principal office address, if applic			
rincipal office address <u>MUST BE A STREET</u>	<u>ADDRESS</u> )		
	<del></del>		•
		<del></del>	<del></del>
Enter new mailing address, if applicable:	c nav		
(Mailing address <u>MAY BE A POST OFFICE</u>	<u> </u>		<del></del>
If amending the registered agent and/or reg	ristored office addre	ss in Florida ente:	· the name of the
new registered agent and/or the new register		My III I TOTTOM, CITCO	
Name of New Registered Agent:			
Traine of the Medical Page 11			
	(Florida stre	eet address)	
	•	•	The side
	(Cit)	·)	, Florida (Zip Code)
		-	
ew Registered Agent's Signature, if changing hereby accept the appointment as registered a		ar with and accept	the obligations of
osition.	-Series Francisco	und videop	

Signature of New Registered Agent, if changing

## 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)

Title ·	· <u>Name</u>	Address	Type of Action
CEO	Tammy L CJAVEZ	1313 Weymouth Drive Deland, Fl 32720	☐ Add ☑ Remove
<u>CEO</u>	Tammy L Chavez	1313 Weymouth Drive Deland, Fl 32720	
SEC	Tania L Skeel	1313 Weymouth Drive Deland, Fl 32720	☑ Add □ Remove
	nding or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)	
	EIN #27-1815965		
		,	
<del></del>			

## • 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
SEC	Tinia L Skeel	1313 Weymouth Drive Deland, Fl 32720	_ □ Add _ ☑ Remove
			_
-			_
E. <u>If amendin</u> (attach addi	g or adding additional Articles, enter tional sheets, if necessary). (Be speci	change(s) here:	
EIN	I #27-1815965		
			<del></del>

The date of each amendmen	t(s) adoption: 2-5-2010
Effective date <u>if applicable</u> :	(date of adoption is required)
* * * *	(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	ere 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 2-5-	2010 Dammes L. Chaves
(By hav	the chairman or vice chairman of the board, president or other officer-if directors on the been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Tammy Chavez
	(Typed or printed name of person signing)
	<u>CEO</u>
	(Title of person signing)

Page 3 of 3