N1000000352

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

Office Use Only



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SECRETARY OF STATE A

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January 6, 2011

KELLY L. HURTADO 9008 SW 211 LANE CUTLER BAY, FL 33189

SUBJECT: NOT FORGOTTEN HEROES FOUNDATION INC.

Ref. Number: N10000002352

We have received your document for NOT FORGOTTEN HEROES FOUNDATION INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

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 (858) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 911A00000513

. Florida 3231*4*



December 7, 2010

KELLY L. HURTADO 9008 SW 211 LANE CUTLER BAY, FL 33189

SUBJECT: NOT FORGOTTEN HEROES FOUNDATION INC.

Ref. Number: N10000002352

We have received your document for NOT FORGOTTEN HEROES FOUNDATION INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

The date of adoption of each amendment must be included in the document.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 610A00028415



COVER LETTER

TO: Amendment Section Division of Corporations

		. \	
NAME OF CORPO	DRATION: NOT FOV	gotten Hevoes	s Foundatio
DOCUMENT NUM	1BER: N 1000 00	0 2352	
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Kelly L. J	f Contact Person)	
	(Fire	n/ Company)	
	CANCE CO.)	(C.1) 1 A	
	4008 800	(Address)	
	Mulli (City/ Sta	11 33 89 ate and Zip Code)	
	E-mail address: (to b) use	Hwtad @ 40 ded for future annual report notifi	ahoo_
For further informati	on concerning this matter, pleas	se call:	
Kelly 1 (Name	Hwtado of Contact Person)	at (<u>954</u>) <u>25</u> (Area Code & Dayt	8.9330 ime Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departme	nt 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)
Amer Divis P.O.	ing Address Indment Section Ion of Corporations Box 6327 Industry FL 32314	Street Address Amendment Section Division of Corporat Clifton Building	ions .

Tallahassee, FL 32301

Articles of Amendment				
Articles of Incorporation 17 JAN 11.				
Articles of Amendment to Articles of Incorporation of Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)				
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) WANTED 33189				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) WWW FL 33189				
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:				
Name of New Registered Agent:				
New Registered Office Address: ODS SU 211 LUVE (Florida street address) (City), Florida 53 89				
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				
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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			
			Remove
.			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
E. <u>If amen</u> (attach a	ding or adding additional A dditional sheets, if necessary)	rticles, enter change(s) here: . (Be specific)	
		v	
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		×	

The date of each amendment(s) adoption: DCC+MOCV 1 2010
Effective date if applicable: Cow days of adoption is required.
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Signature (By the chairman of vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) **August 1** **Aug
(Typed or)printed name of person signing) CEO – President
(Title of person signing)