NII OCCCOIIIC

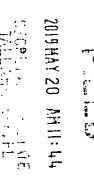
(Requestor's Name)
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R. WHITE.
JUN 0 5 2019

COVER LETTER

TO: Amendment Section Division of Corporations

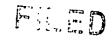
A Helping Rock, Inc. NAME OF CORPORATION:			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submi	tted for filing.		
Please return all correspondence concerning this matter	to the following:		
Mr. Eddy Reyes			
(1)	Name of Contact Person	1)	
A Helping Rock, Inc.			
	(Firm/ Company)		
148017111 Street 7124 Forbes RD.			
-	(Address)		
Dade City, FL 32523 Zephyr Hills FL	33525		
()	City/ State and Zip Code	e)	
e.reyes1971@hotmail.com			
E-mail address: (to be used f	or future annual report	notification)
For further information concerning this matter, please ca	all;		
Wanda Pena			322-5087
(Name of Contact Person)	(Ar	ea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made paya	able to the Florida Depa	irtment of S	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status		Certifi Certifi	O Filing Fee cate of Status led Copy cional Copy is used)
Mailing Address		Address	
Amendment Section		ment Secti	
Division of Corporations P.O. Box 6327		n of Corpo Building	ганоц5
Tallahassee, FL 32314			enter Circle
	-531 62		

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation



2019 MAY 20 AM 11: 44

A Helping Rock, Inc.

(Name of Corporation as curren	thy filed with the	e Florida Dept. of State)	WILL IX
(Document Numb	er of Corporation	ı (if known)	_ -
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida N</i>	ot For Profit Corporation a	dopts the following
A. If amending name, enter the new name of the corporat	ion:		
			The new
name must be distinguishable and contain the word "corpora" Company" or "Co." may not be used in the name.	tion" or "incorpe	orated" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable:		a 7124 Folbes	
Principal office address MUST BE A STREET ADDRESS	Dade City, FL	33523 Zephy (Hill	15 FL. 3354
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14801 7th Street	er 7124 For bes	RJ.
	Dude City, Ft.	33523 Zephyr Huls	FC. 33540
		 -	
D. If amending the registered agent and/or registered office		orida, enter the name of the	
new registered agent and/or the new registered office a	<u>ddress:</u>		
Name of New Registered Agent:			
		(Florida street address)	
New Registered Office Address:			
	2011	<u>-</u>	
	(City)	(Zip ((ode)
New Registered Agent's Signature, if changing Registered			
hereby accept the appointment as registered agent. I am fa	miliar with and a	eccept the obligations of the p	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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Exam <u>X</u> Cl <u>X</u> Re <u>X</u> A	hange emove	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type (Chec	of Action k One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)	Change		-	
	Add			
_	Remove			
2) _	Change			
	Add			
_	Remove			
3)_	Change			
	Add			
_	Remove			
4)	Change	***		
	Add			
	Remove			
<i>5)</i> _	Change			
	Add			
_	Remove			
6) <u> </u>	Change			
	Add			
	Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
We hereby rescind the amendment dated M	May 9th, 2016, amending our original purpose and simultaneously reinstate our
riginal purpose reinstated here for all into	ents and purposes:
To establish a church and ancillary progra	rams to reach the community through active outreach in religious faith."
	programs
·	
,,,	
	
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(date this document was signed.	s) adoption:	if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date will e Department of State's records.	not be listed as the
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 d	nembers entitled to vote on the amendment(s). The amendment(s) was/were irectors.	
Dated $\frac{5}{I}$	5/2019	
have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
	ndatena Eddy Reyes	
	(Typed or printed name of person signing)	
Mie	e President	
	(Title of person signing)	