N11000008523

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Amend Neuro 10-20-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Bahamas Hur	ricane Relief, Inc.	
DOCUMENT NUM	IBER: N11000008523		
The enclosed Article	es of Amendment and fee are sul	bmitted for filing.	
Please return all corr	respondence concerning this mat	tter to the following:	
		ry C Smith	
	(Name of	f Contact Person)	
	Bahamas H	urricane Relief, Inc.	
	(Firm	n/ Company)	
	1306	Main Street	
	(.	Address)	
	Saraso	ota, FL 34236	
	(City/ Sta	te and Zip Code)	
		namasrelief.com ed for future annual report notific	ation)
For further informati	on concerning this matter, pleas	e call:	
Christina Smith		at (941) 365-909	95
(Name	e of Contact Person)		me Telephone Number)
Enclosed is a check f	for the following amount made p	payable to the Florida Departmen	t 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Cente	ons

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FLED

11 OCT 19 AM 9: 26

SECRETARY OF STATE

Bahamas Hu	rricane Relief, Inc.	JAELAHASSEE FLORIDA
(Name of Corporation as curren	ntly filed with the Florida Dept	t. of State)
N110	00008523	
(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, F the following amendment(s) to its Articles of Inc		t For Profit Corporation adopts
A. If amending name, enter the new name of	the corporation:	
The new name must be distinguishable and corabbreviation "Corp." or "Inc." "Company" or		
B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>)	<u>E BOX</u>)	
D. If amending the registered agent and/or renew registered agent and/or the new registered agent: Name of New Registered Agent:		da, enter the name of the
<u>New Registered Office Address</u> :	(Florida street address	
-	(City)	, Florida (Zip Code)
	, ,,	(24)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a position.		d accept the obligations of the

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
Presid	Christina Smith	1306 Main Street	☑ Add
		Sarasota, Fl 34236	☐ Remove
Vice P	Gary Smith	1306 Main Street	
_		Sarasota, Fl 34236	Remove
		Change of titles above	
(attach ad Change o	f titles within the corporation	Be specific) . Gary C. Smith (formerly Preside	-
Vice-Pres	ident. Christina Smith (forme	erly Vice President, is now elected	d President)
	· · · · · · · · · · · · · · · · · · ·		

The date of each amendment	(s) adoption: September 9, 2001
Effective date <u>if applicable</u> :	(date of adoption is required) September 10, 2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/wer was/were sufficient for appr	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or radopted by the board of dir	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Signature (By have	the chairman or vice chairman of the board, president or other officer-if directors enot been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
othe	(Typed or printed name of person signing)
	President
	(Title of person signing)