NII 0000 10932

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TO: Amendment Section Division of Corporations

MISSION OF H NAME OF CORPORATION:	IOPE TO CAMEROON	INC	: 4
DOCUMENT NUMBER: N11000010932			
The enclosed Articles of Amendment and fee are			
Please return all correspondence concerning this	matter to the following:		
	GEORE T. BESON	NG, MD	
	(Name of Contact	Person)	
:	MISSION OF HOPE TO	O CAMEROON	INC
	(Firm/ Compa	ny)	
	2111 HONTON	ROAD	
	(Address)		
	DELAND FL. 3	32720	
	(City/ State and Zi	p Code)	
	misionofhopefl@gm	ail.com	
E-mail address: (to be	used for future annual r	eport notification	on)
For further information concerning this matter, pl	lease call:		
GEORGE T. BESO		407 at	989-9092
(Name of Contact Pe			(Daytime Telephone Number)
Enclosed is a check for the following amount made	de payable to the Florida	a Department of	f State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State		Certi r is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section		Street Address Amendment Sec	ti o n

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Mission Of Hope To Cameroon Inc

(Name of Corporation as currently filed with the Florida Dept. of State) N11000010932 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A 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. 2111 HONTON ROAD B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) DELAND FL 32720 C. Enter new mailing address, if applicable: 2111 HONTON ROAD (Mailing address MAY BE A POST OFFICE BOX) DELAND FL. 32720 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: (Florida street address) New Registered Office Address: N/A (Zip Code) 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	d 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.

Example: X Change X Remove X Add	PT John I V Mike SV Sally 5	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>CO PTR</u>	WANDA L. BRUCE	PO BOX 6512 DELTONA FL 32728
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional she	_	ticles, enter change(s) here: (Be specific)	
ARTICLE III - PURPO	SE AND POWER	S	***
A. MISSON OF HOPE	CAMERRON IN	C dba OUR MISSON OF HOPE INC. is esta	blished as a multifaceted organization
with a strong emphasis of	on the human serv	ices aspect of helping and meeting the needs	of God's people. We are a non-
denomination based, op-	en to people of all	walks of life and religion. We are a firm bel	iever in the word of God and the Bible
is the truth and our road	map to Life, Serv	rice to the homeless and shelters shall be in a	ddtion to our organization services.

B. The Corporation is organized exclusive	ely for chartiable, religious, educational and scientific purposes, including for such
purposes, the making of distributions to o	rganizations that qualify as an exempt organization under section 501(c) (3) of the
Internal Revenue Code, or the correspond	ing section of any future federal tax code.
C. To receive cash or property by gift, dev	rise or bequest or otherwise, and to sell, invest or reinvest the same, and to apply
the income and principal thereof, as the B	oard of Directors may from time to time determine exclusively for the charitable.
educational, literary, scientific purposes e	numerated above: and
D. To the extend not inconsistent with the	activities that my be carred on by a corporation desribed in 501(c)(3) of the Code,
under 170(c)(2) of the Code, to engage in	any lawful act or activity for which corproations may be organized under the
Florida Not For Profit Corporation Act, an	nd to have all of the powers and authorites set forth in Section 617.0302 of the
Florida statutes (Corporation Not For Pro	Tit), which powers are included herein by reference.
E. To support scientific research, education	in and informational activities to increase public awareness.
means of prevention and treatment.	
The date of each amendment(s) adoptio date this document was signed.	n:, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)
<u>Note:</u> If the date inserted in this block document's effective date on the Department.	es not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopted	by the members and the number of votes east for the amendment(s)

was/were sufficient for approval.

Dated 11/19/2021
Signature (By the chairman or 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)
GEORGE T. BESONG, MD
(Typed or printed name of person signing)
DIRECTOR
(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.