

Page 1 of 5  
6/13/2012 10:34:13 AM PDT  
18239628300 From: Jeannal Kang  
Division of Corporations  
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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : LEGALZOOM.COM INC.  
Account Number : I20010000062  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
THE HANDICAP HELPER, INC.**

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6/14/12

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: THE HANDICAP HELPER, INC.

DOCUMENT NUMBER: N12000002066

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barbara Dang  
(Name of Contact Person)

Legalzoom.com, Inc.  
(Firm/ Company)

100 W. Broadway Suite 100  
(Address)

Glendale, CA 91210  
(City/ State and Zip Code)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Dang at ( 323 ) 962-8600 x7950  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

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☒ \$43.75 Filing Fee &  
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is enclosed)

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**FILED**

2012 JUN 13 AM 10:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDAArticles of Amendment  
to  
Articles of Incorporation  
of**THE HANDICAP HELPER, INC.**

(Name of Corporation as currently filed with the Florida Dept. of State)

**N12000002066**

(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:**

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**)**C. Enter new mailing address, if applicable:**(Mailing address **MAY BE A POST OFFICE BOX**)**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:

(Florida street address)

(City)

Florida

(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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>T, D</u>	<u>Don Toce</u>	<u>12039 Wynnfield Lakes Circle</u> <input checked="" type="checkbox"/> Add <u>Jacksonville, FL 32246</u> <input type="checkbox"/> Remove	
<u>D</u>	<u>William Bowling Jr.</u>	<u>12039 Wynnfield Lakes Circle</u> <input type="checkbox"/> Add <u>Jacksonville, FL 32246</u> <input checked="" type="checkbox"/> Remove	
<u>D</u>	<u>Barry Felps</u>	<u>12039 Wynnfield Lakes Circle</u> <input type="checkbox"/> Add <u>Jacksonville, FL 32246</u> <input checked="" type="checkbox"/> Remove	

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

The date of each amendment(s) adoption: 6/6/2012

Effective date if applicable:

*(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.

Dated 6/7/12

Signature James P. Bowling

(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)

\_\_\_\_\_  
(Typed or printed name of person signing)

James P Bowling, President

\_\_\_\_\_  
(Title of person signing)