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(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	_
<u>_</u>	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
/	
Certified Copies Certificates of Status	_
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Special Instructions to Filing Officer:	ĺ
Received phone all from Nancy:  on 6/15/20 - She approved entity  on 6/15/20 - She approved entity  name correction and was filed  name correction	_
15/20 - She approved entry	
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 23, 2020

NANCY MARTINO JEAN UNIQUE HELPING HANDS INTERNATIONAL, INCO 1801 SE HILLMOOR DR C104 PORT SAINT LUCIE, FL 34952

SUBJECT: UNIQUE HELPING HANDS INTERNATIONAL, INCORPORTATED

Ref. Number: N12000003630

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

IN ORDER TO FILE THE AMENDMENT FORM, YOU MUST FIRST REINSTATE THE ENTITY ONLINE AT SUNBIZ.ORG. IT HAS BEEN ADMINISTRATIVELY DISSOLVED DUE TO FAILURE OF COMPLETING THE YEARLY ANNUAL REPORT. YOU MAY CALL 850-245-6059 FOR REINSTATEMENT ASSISTANCE.

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) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 420A00005159



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2020

NANCY MARTINO JEAN UNIQUE HELPING HANDS INTERNATIONAL, INCO 1800 FORESTHILL BLVD., STE. A-1 WEST PALM BEACH, FL 33406

SUBJECT: UNIQUE HELPING HANDS INTERNATIONAL, INCORPORTATED Ref. Number: N12000003630

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

IN ORDER TO FILE THE AMENDMENT FORM, YOU MUST FIRST REINSTATE THE ENTITY ONLINE AT SUNBIZ.ORG. IT HAS BEEN ADMINISTRATIVELY DISSOLVED DUE TO FAILURE OF COMPLETING THE YEARLY ANNUAL REPORT. YOU MAY CALL 850-245-6059 FOR REINSTATEMENT ASSISTANCE.

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Susan Tallent Regulatory Specialist II

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Letter Number: 420A00005159

## COVER LETTER

TO: Amendment Section Division of Corporations

Unique Helping NAME OF CORPORATION:	Hands International. Inc		
N12000003630			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Nancy Martino Jean			
	(Name of Contact Per	son)	
Unique Helping Hands International			
	(Firm/ Company)		
1800 ForestHill Blvd., Ste. A-1			
	(Address)		
West Palm Beach, FL 33406			
	(City/ State and Zip C	ode)	
nanleynmartino@icloud.com			
E-mail address: (to be	used for future annual repo	rt notification	on)
For further information concerning this matter, p	lease call:		
Nancy Martino Jean	at _	772	812-0678
(Name of Contact Pe		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida D	epartment of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of Sta		Certi Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section  Street Address Amendment Section		tion	

Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Unique Helping Hands International, Incorporate	d	
(Name of Corporation as currently filed with the	e Florida Dept. of State)	
N12000003630		
(Docum	nent Number of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006. Flo amendment(s) to its Articles of Incorporation:		Profit Corporation adopts the following
A. If amending name, enter the new name of the	e corporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	1800 ForestHill Blod	
(Principal office address MUST BE A STREET A		20
	West Palm Beach, FL	33406
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	2720 JUH 15 PH 12: 20
		PH
		25
D. If amending the registered agent and/or registered agent and/or the new register		enter the name of the
Name of New Registered Agent:	Nancy Martino Jean	
<u>Name of New Registerea Agent</u> :	1800 Foresthill Blvd., Ste. A-1	
None Booking and (NR of 1) the con-	(Flo	rida street address)
New Registered Office Address:	West Palm Beach	
	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager	Registered Agent: u. I am familiar with and accept t	he obligations of the position
	Signature of New Registe.	red 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.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove   Add   Remove			
4) Change Add		<del></del>	
Remove			
5) Change Add			
Remove			
6) Change Add			
		Page 2 of 4  onal Articles, enter change(s) here:  essary). (Be specific)	
Said organization is orga	nized exc	clusively for charitable, religious, educational, and sci	entif purposes, including,
including, for such purpo	ses, the r	naking of distributions to organizations that qualify a	s exempt organizations described
under section 501(c)(3) of	the Inte	ernal Revenue Code, or corresponding section of any	federal tax code.
Notwithstanding any other	er provisi	ion of these articles, this organization shall not carry or	on any activities not permitted to be
carried on by an organize	dian eve	not from Endoral income tox under section 501(c)(3)	of the Internal Revenue Code or the

corresponding provision of any future United States Internal Revenue law.	
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the mea	ming of
section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or corresponding	onding
section of any future federal tax code, or shall be distributed to the federal government, or to a state or local govern	ment, for
a public purpose. Any such assets not disposed of shall be dispoded of by a court of competent jurisdiction in the c	county in
which the principal office of the organization in then located, exclusively for such purposes or to such organization	or
organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.	
	<del>-</del>
Page 3 of 4	
01/11/2020	
The date of each amendment(s) adoption: date this document was signed.	, 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 does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
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  Signature  01/11/2020
(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)
Nancy Martino Jean
(Typed or printed name of person signing)
Vice President

(Title of person signing)