## N12000034458

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAΠ	MAIL
(Ві	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400283789214

04/07/16--01011--007 \*\*35.00

TILED

THE FR-7 FILE: 48

4/1100

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	HIS VISION OUR H	ANDS INC			
DOCUMENT NUMBER: _	N12000004458				
The enclosed <i>Articles of Ame</i>					
Please return all corresponder	· nce concerning this matter	r to the following	:		
CHRISTOPHER SOUD					
	(	(Name of Contac	t Person)		
LABELLE CPA					
		(Firm/ Comp	any)		
P.O. BOX 1466					
		(Address	)		
LABELLE/ FL/ 33975					
	(	(City/ State and Z	(ip Code)		
chris@labellecpa.com					
E-	mail address: (to be used	for future annual	report notif	ication	
For further information conce	rning this matter, please c	call:			
CHRISTOPHER SOUD			863 at		675-3903
(	Name of Contact Person)			Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pay	able to the Floric	ia Departme	ent of S	tate;
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)	y is	Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee	t Section Corporations 327		Street Add Amendmen Division of Clifton Bui 2661 Execu	TSection Corporation	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## HIS VISION OUR HANDS INC

(Name of Corporation as cu	urrently filed with the Florida Dept. of State)
N12000004458	
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:
NO CHANGE	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	NO CHANGE
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ESS</u> )
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered	d office address in Florida actor the compatible
new registered agent and/or the new registered off	fice address:
No C	CHANGE
	(Florida street address)
New Registered Office Address:	
	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe	rered Agent:
hereby accept the appointment as registered agent. I are	am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing
	dignature of New Negwieren Agent, if chunging

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	NO	CHANGE	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>			Address
1) Change					
Add					
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

AMEND ARTICLE III - PURPOSE TO READ AS FOLLOWS:							
The Corporation is organized and operated exclusively for charitable, religious, and educational puposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the							
							Internal Revenue Code.
						-	
		· · · · · · · · · · · · · · · · · · ·				1 1 2 2	
		, <b></b>					
				-			
						· <del>-</del>	
						<u> </u>	
				<del> </del>			
		·,					
				<del></del> .			· · ·

The	, if other than the		
Eff	ective date <u>if applicable</u>	· ·	
		(no more than 90 days after amendment file date)	
Not doc	te: If the date inserted in sument's effective date on	this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.	not be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/was/were sufficient for	were adopted by the members and the number of votes cast for the amendment(s) approval.	
	There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.	
	Dated 3/28	/16	
	Signature X	Sat Chall	
	have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	s	cott Wegscheid	
	_	(Typed or printed name of person signing)	
	D	irector	
	~	(Title of person signing)	