## N1200006697

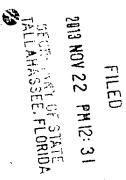
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## **COVER LETTER**

TO: Amendment Section Division of Corporations Family Hope Pregnancy Center Inc. N12000006697 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Debra DeWitt (Name of Contact Person) Family Hope Pregnancy Center Inc. (Firm/ Company) 20892 Second Ave. (Address) Dunnellon, Fl. 34431 (City/ State and Zip Code) familyhopepregnancycenter@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Debra DeWitt (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee

**Mailing Address** 

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

Certificate of Status

## Street Address

Certified Copy (Additional copy is

enclosed)

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

Certificate of Status

Certified Copy (Additional Copy is

Enclosed)

## Articles of Amendment to Articles of Incorporation

FILED

Family Hope Pregnancy Center Inc.

2013 NOV 22 PM 12: 31

JACON LAKY OF STATE JALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) N12000006697 (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: -NAname 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: (Florida street address) New Registered Office Address: 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

Page 1 of 4

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 Doc, 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
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Add			
Remove			
2) Change			
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(attach additional sheets, if necessary). (Be specific)
Add to Article III
Said organization is organized exclusively for charitable, religious,
educational, and scientific purposes, including, for such purposes,
the making of distribution to organizations that qualify as exempt
organizations under section 501(c)(3) of Internal Revenue Code, of
corresponding section of any future tax code.
M 1 = 37400

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) as date this document was signed.	Movember, 19 2013	, if other tha
Effective date if applicable:	November, 19 2013	
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Signature (By the chai have not be	rman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator – if in the hands of a receiver, trustec, or appointed fiduciary by that fiduciary)	<del></del>
other court	Debra DeWitt	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	