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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	Danny' s House F	ood Bank Corp		
DOCUMENT NUMBER: _	N12000008428			
The enclosed Articles of Ama	endment and fee are subm	nitted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
		Daniel Orozco		
		(Name of Contact Pe	erson)	
	Dann	y's House Food Ban	ak Corp	
		(Firm/ Company	/)	
		414 NW 10th Ave	e .	
		(Address)		
		Homestead, FI 3303	30	
	(City/ State and Zip	Code)	
		dorozco27@aol.co	m	
E-	mail address: (to be used	for future annual rep	ort notification	1)
For further information conce	erning this matter, please of	eall:		
Dan	el Orozco	at	(786)	255-1569
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pay	able to the Florida I	Department of	State:
☐ \$35 Filing Fee	■\$43.75 Filing Fee & { Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)

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

Articles of Amendment Articles of Incorporation

15 JUL 13 AR 5: 09

Dann	sy's House Food Bank Co	inp 10 302 30 its 0-00
(Name of Corporation as	currently filed with the	
	N12000008428	HALLAHASSEE, FLORIJA
(Document	t Number of Corporation	(if knawn)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Ne</i>	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable	,	rated" or the abbreviation "Corp." or "Inc."
Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u> </u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered agent.		rida, enter the name of the
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regineraby accept the appointment as registered agent.		ecept the obligations of the position.
	Character of No. 7	Projections of Appart of School-
	Signature of New h	Registered 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Jhacnea Leal	19320 SW 292 St
X Add			Homestead, Fl 33030
Remove			
2) Change	v	Henry Multales	3740 SW 130 Ave.
Add			Miami, Fl 33175
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		-	
Remove			
···			
6) Change			
Add			
Remove			

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
	
* .	

	``	Jaiv 1, 2015	
Fbe d	ate of each amend	ment(s) adoption:	, if other than the
	his document was si		
	· ,	' Jany (, 2015	
Effect	tive date <u>if applical</u>		
	<u> </u>	(no more than 90 days after amendment file date)	
		in this block does not meet the applicable statutory filing requirements, this date will ron the Department of State's records.	not be usted as Mic.
Adop	tion of Amendmen	t(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient f	vas/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
	There are no membe adopted by the board	rs or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.	
	Dated _	July 1, 2015	
	Signature _		
	(B	y the chairman or vice chairman of the board, president or other officer-if directors	
	h	ave not been selected, by an incorporator - if in the hands of a receiver, trustee, or	
	0	ther court appointed fiduciary by that fiduciary)	
		Daniel Orozco	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	