Division of Corporations Electronic Filing Cover Sheet

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(((H12000229299 3)))



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To:

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From:

Account Name : H. BART FLEET Account Number: I20020000170 : (850)651-4006

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COR AMND/RESTATE/CORRECT OR O/D RESIGN LITTLE INNS OF HOPE, INC.

Certificate of Status	0
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SEP 26 2012

T. BROWN

P. 007 Fax Server



September 25, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LITTLE INNS OF HOPE, INC. 1075 TREE POINT DRIVE FORT WALTON BEACH, FL 32547

SUBJECT: LITTLE INNS OF HOPE, INC.

REF: N12000008698

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: B12000229299 Letter Number: 112A00023895

12 SEP 25 AM 8: 11
OFFICE AND SEP 11

P.O BOX 6327 - Tallahassee, Florida 32314

New Registered Agent's Signature, if changing Registered Agent;

Articles of Incorporation Little Inns of Hope, Inc. (Name of Corporation as currently filed with the Marida Dept. of State) N12000008698 (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: 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. 1283 North Eglin Pkwy B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) Suite A Shalimar, FL 32579 C. Enter new mailing address, if applicable: 1283 North Eglin Pkwy (Mailing address MAY BE A POST OFFICE BOX) Suite A Shalimar, FL 32579 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: (Piorida sireet address) New Registered Office Address: Florida (City) (Zip Code)

Articles of Amendment

Page 1 of 4

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,

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 Funancial 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 Y. There is a change, Mike Jones leaves the corporation, Sally Smith is named the Y and S. There 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	PI Y SY	John Doe Mike Jones Sally Smith	•	
<u>Type of Action</u> (Check One)	Title	Name		Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3)Change		_		
Add				
Remove				
1) Change				
Add				
Remove				
Change				
Add				
Remove				
6) Change				
Add				
Remove				

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(arrach additional sheets, if necessary). (Be specific)
Article II
The principal place of business address:
1283 North Eglin Pkwy, Suite A
Shalimar, FL 32579
The mailing address of the corporation is:
1283 North Eglin Pkwy, Suite A
Shalimar, FL 32579
<u> </u>

The	date of each amendment(s) adoption: September 20, 2012				
	active date if applicable:				
	(no more than 90 days after amendment file date)				
Ådо	option 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 September 20, 2012				
	Signature				
	(By the chairman of 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)				
	Barry Pritchett				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				