

N120000011541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

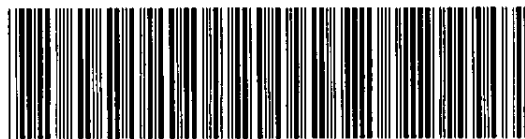
(Business Entity Name)

(Document Number)

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Amel

AUG 14 2014

R. WHITE

RECEIVED
DEPARTMENT OF STATE
14 AUG 13 PM 12:06

RECEIVED
14 AUG 13 PM 12:06
FBI/DOJ

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Where Love Grows Inc

Signature

Requested by: Seth

08/13/14

Name

Date

Time

Walk-In

Will Pick Up

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ ☒ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Where Love Grows Inc.

DOCUMENT NUMBER: N12000011541

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Victoria Anzalone

(Name of Contact Person)

Where Love Grows Inc.

(Firm/ Company)

700 S. Harbour Island Blvd., Unit 834

(Address)

Tampa, Florida 33602

(City/ State and Zip Code)

vicki@wherelovegrows.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Victoria Anzalone

(Name of Contact Person)

813

223-4085

at ()

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed)

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
to
Articles of Incorporation
of

FILED
14 AUG 13 17 5:27
TAMPA, FLORIDA

Where Love Grows Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N12000011541

(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:

n/a

The new

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.

B. Enter new principal office address, if applicable:

n/a

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

n/a

(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: n/a

(Florida street address)

New Registered Office Address:

n/a

(City)

Florida

(Zip Code)

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.

n/a

Signature of New 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>Pres</u>	<u>Chase Anzalone</u>	<u>700 S. Harbour Island Blvd.</u> <u>Unit 834</u> <u>Tampa, FL 33602</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>V.P.</u>	<u>Chad Anzalone</u>	<u>700 S. Harbour Island Blvd.</u> <u>Unit 834</u> <u>Tampa, FL 33602</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Pres</u>	<u>Shawna Culp</u>	<u>2530 Sand Plum Circle</u> <u>Edmond, OK 73025-1148</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V.P.</u>	<u>Meredith Brooke Mullen</u>	<u>1059 Normand Trace</u> <u>Tampa, FL 33602</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Secty.</u>	<u>Jake Linus</u>	<u>4207 S. Dale Mabry Hwy.</u> <u>Unit #8303</u> <u>Tampa, FL 33611</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Treasurer</u>	<u>Jake Linus</u>	<u>4207 S. Dale Mabry Hwy.</u> <u>Unit #8303</u> <u>Tampa, FL 33611</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ARTICLE III - PURPOSE:

The purpose for which the corporation is organized is:
exclusively for charitable, religious, educational and scientific purposes
under section 501(c)(3) of the Internal Revenue Code, or corresponding
section of any future federal tax code. It is not organized for the private
gain of any person. Our further purpose includes combating
childhood hunger, educating the community on childhood hunger
and coordinating community events in support of children and families.

ARTICLE IX - DISTRIBUTIONS ONLY FOR THE EXEMPT PURPOSES UPON DISSOLUTION:

Upon dissolution of the corporation, assets shall be distributed for one or
more exempt purposes within the meaning of section 501(c)(3) of the
Internal Revenue Code, or the corresponding section of any further federal
tax code, or shall be disposed of by a Court of Competent Jurisdiction of
the county in which the principle office of the corporation is then located,
exclusively for such purposes or to such organization or organizations,
as said Court shall determine which are organized and operated
for such purpose.

The date of each amendment(s) adoption: 8/12/2014, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 8/12/2014
Signature Victoria Anzalone
(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)

Victoria Anzalone

(Typed or printed name of person signing)

Founder and CEO

(Title of person signing)