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**Florida Not For Profit Corporation**  
**YOUNG ADVOCATES LEADING BY EXAMPLE, INC.**  
**Filing Information**  
**Document Number**N13000002652**FEI/EIN Number**46-3183358

December 19, 2024

**AMENDMENT TO ARTICLE I**

**Previous name:** YOUNG ADVOCATES LEADING BY EXAMPLE, INC

**New Name:** CONQUERING HOPE BLUEPRINT, INC.,

**AMENDMENT TO ARTICLE III**

Conquering Hope Blueprint, Inc..is dedicated to empowering communities by providing mentorship to at-risk youth, equitable access to safe and affordable housing, education, literacy programs, wraparound support services, technology, economic and infrastructure development, trauma, and social justice advocacy.

Through a holistic approach, we strive to create opportunities, strengthen communities, and equip individuals and families with the tools needed to achieve stability, personal growth, and a brighter future.

**AMENDMENT TO ARTICLE VII**

**REMOVE**

Title President  
KING , ANDREA  
22350 OLD DIXIE HWY  
700388  
MIAMI, FL 33170

**REMOVE**

Title Director  
Andrew, Forrest  
po box 700388  
Miami, FL 33170

**REMOVE**

Title Treasurer  
ECHOLES , HASINA  
22350 OLD DIXIE HWY  
70038  
MIAMI, FL 33170

**REMOVE**

Title VP. Secretary  
BENNETT-LIM, RULAH  
22350 OLD DIXIE HWY  
700388  
MIAMI, FL 33170

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: YOUNG ADVOCATES LEADING BY EXAMPLE, INC

DOCUMENT NUMBER: N13000002652

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

Please return all correspondence concerning this matter to the following:

KIONNE L. MCGHEE

(Name of Contact Person)

KIONNE L. MCGHEE LAW GROUP

(Firm/ Company)

PO BOX 700388

(Address)

MIAMI, FLORIDA 33170

(City/ State and Zip Code)

YOUNGADVOCATESLEADING1@GMAIL.COM

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

For further information concerning this matter, please call:

KIONNE MCGHEE

786

6109732

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

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

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

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

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

YOUNG ADVOCATES LEADING BY EXAMPLE, INC.

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

N13000002652

(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:

CONQUERING HOPE BLUEPRINT, INC

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:

848 BRICKELL AVENUE, PENTHOUSE 5

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33131

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 700388

MIAMI, FLORIDA 33176

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:

KIONNE L. MCGHEE LAW GROUP, PLLC

848 Brickell Avenue, Penthouse 5

(Florida street address)

New Registered Office Address:

MIAMI

(City)

Florida 33131

(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.

Signature of New Registered Agent, if changing

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CLERK OF STATE  
TALLAHASSEE, FL

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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PTD</u>	<u>KIONNE L MCGHEE</u>	<u>PO BOX 700388 MIAMI</u> <u>FLORIDA, 33170</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VSD</u>	<u>STACY MCGHEE</u>	<u>PO BOX 700388</u> <u>MIAMI, FL 33170</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D,TR</u>	<u>KIONNE L. MCGHEE II</u>	<u>PO BOX 700388</u> <u>MIAMI, FL 33170</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>HAYLEY MCGHEE</u>	<u>PO BOX 700388</u> <u>MIAMI, FL 33170</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>HAYES MCGHEE</u>	<u>PO BOX 700388</u> <u>MIAMI, FLORIDA 33170</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u>

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

AMENDING ARTICLE III- SEE ATTACHED DOCUMENT

**■** 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 December 19, 2024

Signature \_\_\_\_\_  
(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)

KIONNE L. MCGHEE

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)