N13000003118

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TALL ARYSES OF DEATH

AND AND

C. LEWIS

APR 2 4 2014.

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations Hope Project International Inc N13000003118 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Nathanael Graffam (Name of Contact Person) Hope Project International Inc (Firm/ Company) 3903 Strickland Ct (Address) Lakeland FI 33812 (City/ State and Zip Code) than@hopeproject.in E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nathanael Graffam (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 Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is

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

Enclosed)

APPRUVEG AND FILED

Articles of Amendment to Articles of Incorporation of

14 APR 17 PM 12: 40

SECRETARY OF STATE TALLAHASSES, FLORIDA

Hope Project International Inc	-	.,,,
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
N13000003118		
(Document Number of C	Corporation (if known)	
ursuant to the provisions of section 617.1006, Florida Statu nendment(s) to its Articles of Incorporation:	ates, this <i>Florida Not For Profit Corpora</i>	tion adopts the following
. If amending name, enter the new name of the corpora	ation:	_
ame must be distinguishable and contain the word "corpor	ration" or "incorporated" or the abbrevi	The new
Company" or "Co." may not be used in the name.	anon or incorporated or the aborevi	anon corp. or mc.
	N/A	
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS		
interpretation of the second o		
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)	14//	
	· · · · · · · · · · · · · · · · · · ·	<u>-</u>
. If amending the registered agent and/or registered of	fice 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:	(1 sorma sireti maness)	
	Plant da	
(Cin	, Florida v)	(Zip Code)
	•	(Exp Code)
ew Registered Agent's Signature, if changing Registere		of the magister.
nereby accept the appointment as registered agent. I am j	iumiliar wiin ana accept the obligations c	у те розтоп.
Signature of New	w 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 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)	Title	<u>Name</u>	<u>Addres</u> s
1)Change			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change	<u> </u>		
Add			
Remove			
4) Change			
Add			
Remove			,
5) Change			
Add			
Remove			
			····
6) Change		-	
Add			
Remove			

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

Add Article VIII

Distribution of Assets

Distribution of Assets
Upon the dissolution of the organization, assets shall be
distributed for one or more exempt purposes within the
meaning of Section 501(c)(3) of the Internal Revenue
Code, or corrisponding section of any future federal tax
code, or shall be distributed to the federal government,
or to a state or local government, for a public purpose.
Any such assets not disposed of shall be disposed of by a
court of competent jurisdiction in the county in which the
principal office of the organization is then located,
exclusively for such purposes or to such organization or
organizations, as said Court shall determine, which are
organized and opperated exclusively for such purposes.



The date of each amendment(s	adoption:	14 APR 17 PH 12; If Other than the
date this document was signed.		SECRETARY OF SPAN
Effective date if applicable: _	(no more than 90 days after c	TALLAHASSEE, FLORIDA unendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer was/were sufficient for appr	e adopted by the members and the numeroval.	per of votes cast for the amendment(s)
There are no members or m adopted by the board of dir	embers entitled to vote on the amendme ectors.	ent(s). The amendment(s) was/were
Dated 04/1	5/2014	
Signature V	Wand Mr-	
have not	hairman or vice chairman of the board, been selected, by an incorporator – if i urt appointed fiduciary by that fiduciary	n the hands of a receiver, trustee, or
Nathan	ael Graffam	
	(Typed or printed name of person s	igning)
Preside	ent	·
- '	(Title of nerson signing)	