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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Fresh State	rt Men's C	Group Home, Inc.
DOCUMENT NUMBER: N1300000	3236	
The enclosed Articles of Amendment and fee are submi	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Cassa	andra Col	eman
()	Name of Contact Per	rson)
Fresh Start Vet	erans Fo	undation, Inc.
	(Firm/ Company))
841	2 Monte I	_ane
	(Address)	· · · · · · · · · · · · · · · · · · ·
Tallahas	see, Flori	da 32305
(0	City/ State and Zip C	ode)
	0@comc	•
E-mail address: (to be used f	or future annual repo	ort notification)
For further information concerning this matter, please co		
Cassandra Coleman	at (85	0 , 688-0311
(Name of Contact Person)		Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pays	able to the Florida D	epartment of State:
□ \$35 Filing Fee	1\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Am Div Clif	eet Address endment Section ision of Corporations ton Building
Tallahassee, FL 32314	266	1 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Fresh Start Mer	n's Group Home, Inc.	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
N130	00003236	
(Document Number of Corpor	ration (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporat	ion;	
Fresh Start Vetera	ins Foundation, Inc.	
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:	8412 Monte Lane	
(Principal office address MUST BE A STREET ADDRESS	Tallahassee, Florida 32305	
	 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8412 Monte Lane	
(Tallahassee, Florida 32305	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	miliar with and accept the obligations of the position.	
Signature of New Regis	stered 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 <math>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		<u> </u>	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add		-	
Remove			
4) Change			
Add			
Remove			STANTY STORY
5) Change		_	
Add			
Remove			
6) Change	<u></u> .		
Add			
Remove			

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

Organized exclusively for charitable, religious, educational, and
scientific purposes, including, for such purposes, the making of
distributions to organizations that qualify as exempt organizations
under section 501c3 of the Internal Revenue Code, or corresponding
section of any future tax code. Upon dissolution of the organization,
assets shall be distributed for one or more exempt purposes
within the meaning of section 501c3 of the Internal Revenue Code or
corresponding section of any future federal tax code or shall be
distributed to the federal government, or to the state or local
government, for a public purpose. Any such assets not disposed of
shall be disposed of by the Court of Common Pleas of 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 operated
exclusively for such purposes. The mission of Fresh Start Veteran s
Foundation, Inc. is to improve the quality of life for Veterans by
providing housing and a variety of support, educational and training
services to benefit their living conditions, mental, social, physical,
financial, and emotional well being.

Гhe	date of each amendmen	t(s) adoption: 0/ 1/ 13
iffe	ctive date <u>if applicable</u> :	6/1/13
	The trace of the processor.	(no more than 90 days after amendment file date)
۱do	ption of Amendment(s)	(CHECK ONE)
	The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.
	There are no members or adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.
	Dated 6/1 Signature	Isand ha Coteman
	(Fly the	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
		Cassandra Coleman
	a	(Typed or printed name of person signing) Mand/ru (Oleman)
		(Title of person signing)