

N13000011162

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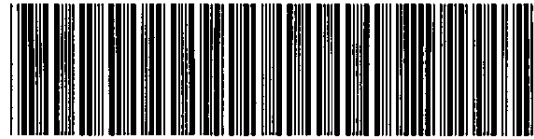
(Business Entity Name)

(Document Number)

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Amend
10 6.25.14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Blessings of Hope Empowerment Outreach Inc
DOCUMENT NUMBER: N1300001162

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

Please return all correspondence concerning this matter to the following:

Arissa Butler
(Name of Contact Person)
Blessings of Hope Empowerment Outreach Inc.
(Firm/ Company)
435 Forest Drive North
(Address)
Harawa, Florida 32333
(City/ State and Zip Code)
ybunua 72@ yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tarent Butler at 850 294-8978
(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:

- ☒ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

14 JUN 23 PM 12:25

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

May 8, 2014

ANISSA BUTLER
BLESSINGS OF HOPE EMPOWERMENT
435 FOREST DR. NORTH
HAVANA, FL 32333

SUBJECT: BLESSINGS OF HOPE EMPOWERMENT OUTREACH, INC.
Ref. Number: N13000011162

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**.

Please specify which article number and/or article title you are amending, adding, or deleting.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 814A00009866

Articles of Amendment

to

Articles of Incorporation

of

Dressings of Hope Empowerment Outreach, Inc.

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

N13000011162

(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:

_____ 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:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(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: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (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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STATE
SECRETARY OF
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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>

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change
☐ Add
☒ Remove
Treasurer Black, O'Hara P.O. Box 1185
Havana
Florida 32333
- 2) ☐ Change
☐ Add
☒ Remove
Secretary McCloud, Bridgette P.O. Box 1185
Havana,
Florida 32333
- 3) ☐ Change
☒ Add
☐ Remove
President Butler, Anissa P.O. Box 1185
Havana
Florida 32333
- 4) ☐ Change
☒ Add
☐ Remove
Secretary Laster, Melissa P.O. Box 1185
Havana
Florida 32333
- 5) ☐ Change
☒ Add
☐ Remove
Treasurer Williams, Monica P.O. Box 1185
Havana
Florida 32333
- 6) ☐ Change
☐ Add
☐ Remove

[illegible]

The date of each amendment(s) adoption: _____, 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

April 23, 2014

Signature

Anissa Butler

(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)

ANISSA BUTLER

(Typed or printed name of person signing)

Director

(Title of person signing)