N14000001500

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(Cir	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section

Division of Corporations-

Tallahassee, FL 32314

AND ST Love the Hungry, Inc NAME OF CORPORATION: _ N 1400000 1500 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Noralyn B. ESCANO
(Name of Contact Person) (Firm/ Company) 6329 Coliseum Blvd
(Address) Port Charlotte, F1 33981
(City/ State and Zip Code) nbes cano 2014 e gmail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Noral yn B. ESCANO at 702 - 525 - 4378 (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 & □\$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 Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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Love the h	turary INC 2
	tly filed with the Florida Dept. of State)
N 14000015	700
	er of Corporation (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:
NIA	The new
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:	13353 Carter Ave
(Principal office address MUST BE A STREET ADDRESS	Port Charlotk, Fl. 33981
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13353 Carter Ave
	13353 Carler, Ave Port Charlotk, Fl 33981
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
	Gloria V. Balan
	13353 Carter Ave
New Registered Office Address:	(Florida street address)
	ort Charlotte Florida 33981
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fat	miliar with and accept the obligations of the position. $M_{L_{\infty}}$
X 24	gnature of New Registered Agent, if changing
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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: XChange X Remove A Add	<u>V</u> <u>Mi</u>	hn Doe ke Jones Ily Smith	
X Remove 2) X Change P Gloria V. Balan 13253 Cartic Asc Add Pert Charlottic, F1 3 Remove 3) Change V Linda Smith. 2517 Bayshore Ro X Add Nekomis, F1 34276 Remove 4) Change S Noralyn B. Escano (329 Coliseum & Part Charlotte, F1 33 Remove 5) Change S Donna Herring 11010 Decreased Asc Englewood, F1 3423 X Remove 6) Change		<u>Title</u>	<u>Name</u>	<u>Addres</u> s
2) X Change P Gloria V. Balan 13853 Carter Arc Port Charlotte, F1 3 Remove 3) Change V Linda Smith. 2517 Bayshore Ro X Add Nokomis, F1 34279 Remove 4) Change S Noralyn B. Escano (329 Coliseum & Part Charlotte, F1 33 Remove 5) Change S Donna Herring 11010 Deerwood Ave Englewood, F1 3423 X Remove 6) Change	Add	<u>P</u>	Deborah S. Crawford	438 Pineview Drive Venice, F1 34293
Change Linda Smith 3517 Bayshore Row X Add Nokomis, Fl 34278	2) X Change	<u> P</u>	Gloria V. Balan	13853 Carleic Asc Port Charlotle, Fl 33981
A) _ Change S Noralyn B. Escano (329 Coliseum E Port Charlotte, F1 33	3) Change		Linda Smith.	2517 Bayshore Road Nokomis, Fl 34275
S Donna Herring 11010 Deerwood, Ave Englewood, Fl 3423 X Remove 6)Change	4) Change	<u>S</u>	Noralyn B. Escano	<u>6329 Coliseum</u> Blva Poxt Charlotte, Fl 33981
6) Change	5) Change Add	<u>S</u>	Donna Hering	11010 Deerwood Ave Englewood, Fl 34224
Remove	6) Change Add			

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.

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Example: X Change X Remove X Add	PT <u>John D</u> V <u>Mike J</u> SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	Advisor	Ronnie A. Escarb	læ29 Coliseum Blyd Port Charlotte Fl 33981
_X Add	Rub <u>lic Rulati</u>	ons Joyce David Morehead	1617 Bob O'Link Drive Venice, Fl 34293
Remove 3) Change Add			
Remove			
4) Change Add Remove			
5) Change Add			
Remove 6) Change			
Add			

The date of each amendment(s) adoption: 10/10/17 date this document was signed.	, if other than the
Effective date if applicable: 10/10/17 (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendme was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/we adopted by the board of directors.	rre
Dated 10/10/17	
Signature X Alafa	
(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	ors or
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	_