

N14000005915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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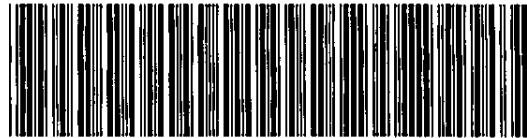
(Business Entity Name)

(Document Number)

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Helping Hands Outreach Ministries of Florida, Inc

DOCUMENT NUMBER: NI4000005915

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

Please return all correspondence concerning this matter to the following:

John Green

(Name of Contact Person)

Helping Hands Outreach Ministries of Florida, INC

(Firm/ Company)

4630 S. Kirkman Rd #166

(Address)

Orlando, FL 32811

(City/ State and Zip Code)

hhomfinc@yahoo.com

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

For further information concerning this matter, please call:

John Green

(Name of Contact Person)

at ( 407 ) 952-8166

(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

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Articles of Amendment  
to  
Articles of Incorporation  
of

Helping Hands Outreach Ministries of Florida, INC  
(Name of Corporation as currently filed with the Florida Dept. of State)

N14000005915

(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:

N/A

*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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

, Florida

(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.*

N/A

Signature of New Registered Agent, if changing

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ALL

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>
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SEE ATTACHED

1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

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

Please SEE ATTACHED ARTICLES with Changes

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The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: N/A  
(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 10-1-14

Signature [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)

John Green  
(Typed or printed name of person signing)

President  
(Title of person signing)

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STATE OF NEW YORK

Articles of Amendment  
to  
ARTICLES OF INCORPORATION  
For  
HELPING HANDS OUTREACH MINISTRIES OF FLORIDA, INC.

The undersigned incorporator, for the purpose of forming a Florida not-for-profit corporation, hereby adopts the following Articles of Incorporation:

**Article 1**

The name of the corporation is:

HELPING HANDS OUTREACH MINISTRIES OF FLORIDA, INC.

**Article II**

The principal place of business address:

4630 S Kirkman Road #166  
Orlando, Florida 32811

The mailing address of the corporation is:

4630 S Kirkman Road #166  
Orlando, Florida 32811

**Article III**

The specific purpose for which this corporation is organized is:

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This organization is organized exclusively for charitable purpose within the meaning of section 501(c) (3) of the Internal Revenue Code. Notwithstanding any other provision of these Articles, the organization shall not carry on any other activities not permitted to be carried on by an organization exempt from Federal Income Tax as an organization described in section 501(c) (3) of the Internal Revenue Code (or corresponding section of any future federal tax code). This corporation is a not-for-profit organization, solely for the purpose of transacting the business and activities specific and authorized by Section 501(c)(3) of the Internal Revenue Code and Fla. Stat. 607.0301, more specifically stated as providing assistance to the ministry in the delivery of healthcare relations, consisting of well-care and physical fitness, social care and education. This mission is consistent with the ministering of educational, health care and spiritual wellbeing assistance by enabling parents to be gainfully employed by providing childcare and physical fitness. A more defined description may be found in the organizational bylaws.

#### **Article IV**

The manner in which directors are elected or appointed is:

The board is composed of four (4) officers; all of whom shall be initially be appointed by the Corporate President in the offices of Secretary, Chair, Vice-Chair and Trustee of the subsidiaries (educational and health facilitation services). The qualifications, the time and manner of electing or appointing, the duties of, the terms of office, and manner of removing officers/directors shall be set forth in the organizational bylaws.

#### **Article V**

The name and Florida Street address of the registered agent is:

JOHN S GREEN

3325 S Kirkman Road #415

Orlando, Florida 32811



I CERTIFY that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: JOHN S GREEN

**Article VI**

The name and address of the incorporator is:

JOHN S GREEN  
3325 S Kirkman Road #415  
Orlando, Florida 32811

Incorporator Signature: JOHN S GREEN

**Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P/C  
JOHN S GREEN  
3325 S Kirkman Road #415  
Orlando, Florida 32811

Title: VC  
FAYE CURRY  
8545 Evergreen Trail #8-312  
Olmsted Falls, Ohio 44138

Title: S  
SHANESIA METRIUS

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2014

3355 S Kirkman Road #1321

Orlando, Florida 32811

Title: T

JOSEPH L WILLIAMS

26 SE 9th Street

Gainesville, Florida 32609

Title: T

CHLOE DESTINE

605 E Robinson Street

Orlando, Florida 32801

#### **Article VIII**

Duration; Existence

The duration of this corporation is perpetual unless and until it is dissolved by law, Corporate existence shall commence on the date these Articles of Incorporation are filed by the Department of the State.

#### **Article IX**

Indemnification

Whenever any civil or criminal action has been brought against a Board Officer for any act or omission arising out of and in the course of the performance of his or her duties and responsibilities, the Board may defray all cost of defending such action, including reasonable attorney's fees and expenses together with costs of appeal, and may save harmless and protect such person from any financial loss resulting from the

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lawful performance of his or her duties and responsibilities. Claims based on such actions or omissions may, in the discretion of the Board, be settled prior to or after the filing of suit thereon. The Board may arrange for and pay the premium for appropriate insurance to cover all such losses and expenses, with final decision made by the Corporate President.

## **Article X**

### **Assets**

All organization assets are dedicated solely to the exempt purposes of this organization for exempt purposes within IRC 501(c)(3).

## **Article XI**

### **Dissolution**

Upon dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the IRC, or the corresponding section of any further federal tax code, or shall be distributed to the federal government, or to a state or local government for public purpose. Any such assets not so disposed of shall be disposed of by Court of Competent Jurisdiction of the county in which the principal office of the Corporation is then located, exclusively for such purpose or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.