# NH000011250

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: His Heart to the Nations, Inc.
DOCUMENT NUMBER: N140000 11250
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kathy Krupinski (Name of Contact Person)
His Heart to the Nations, Inc.
7714 Gaston Drive
Port Richey, Florida 34668 (City/ State and Zip Code)
his heart 2n Oyahoo. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kathy Krupinski at (727) 457-6163 (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:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### **Articles of Amendment**

# Articles of Incorporation of

His Heart to the	Nations Inc.  rently filed with the Florida Dept. of State
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
N 140000 11250	
(Document Nu	umber of Corporation (if known)
	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:
N/A	The new
name must be distinguishable and contain the word "corpo	The new oration" 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:	NA
(Principal office address MUST BE A STREET ADDRES	SS)
	SE SE
	第6 是 0
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(Mulling address MAT BE A FOST OF FICE BOA)	- North
	4
D. If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered offic	ce address:
Name of New Registered Agent:	M/A
	. 1
	(Florida street address)
New Registered Office Address:	1
	N / A Florida
	, Florida (City)
N. B. day Market M. Charles Market Barrier Barrier	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Tuni	, I
	NIR
<u></u>	N R Signature of New Registered Agent, if changing

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	PT         John I           V         Mike           SV         Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		Mary I Slack	15726 Winnerlane Hudson, FL. 34667
Remove 2) Change Add	CEO	LorilSchaefer	6808 Apple wood Drive Wesley Chapel, Fl 33544
Remove 3) Change Add Remove	<del></del>		
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 spe

Article IX No part of the net earnings of the corporation shall inure to the benefit of, or be distributed to its members, trustees, officers, or other private persons, t that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments distributions in furtherance part of activities of the corporation carrying on of propaganda, or otherwise influence legislation, and the corporation participate in, or intervene in (including the oublishing or distribution of statemen campaign on behalf of any candidate for public offi any other provision of these articles, the corporation shall not carry on any other activities to be carried on (a) by a corporation exempt Hederal income tax under section Internal Revenue Code, or the corresponding sec tax code, or (b) deductible under (C)(2) of the Internal Revenue Code, or the corresection of any future federal tax Code.

## **Attachment to Amendment**

Article X Dissolution Clause
Upon the dissolution of this organization.
assets shall be distributed for one or more
exempt purposes within the meaning of
section soile)(3) of the Internal Revenue lock
or corresponding 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.

The date of each amendment(s) date this document was signed.	adoption:	11	25	2015	, if other than th
Effective date if applicable:	(no mor	e than 90	days after	r amendment file date)	
Note: If the date inserted in this is document's effective date on the I				atutory filing requirem	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHEC	K ONE	)		
☐ The amendment(s) was/were was/were sufficient for approx		nembers a	and the nur	mber of votes cast for t	the amendment(s)
There are no members or me adopted by the board of directions.		vote on t	he amendr	nent(s). The amendme	ent(s) was/were
Dated	12/4/=	2015	<del>-</del>	<del></del>	
Signature	Sathy	Kn	ypin	ski , president or other of	From if directors
have not l		an incorp	orator – if	in the hands of a rece	
	Kath	y K Typed o	rup r printed r	inski name of person signing	()
	Pre	side	· · · · · · · · · · · · · · · · · · ·	f person signing)	