

N15000000829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

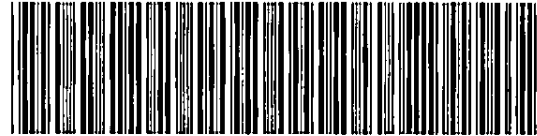
(Business Entity Name)

(Document Number)

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Amend  
Name chg

OCT 23 2019  
ALBRITTON

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: MAKE THE HOMELESS SMILE MIAMI INC

DOCUMENT NUMBER: N15000000829

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

Please return all correspondence concerning this matter to the following:

ANNA-BO EMMANUEL  
(Name of Contact Person)

LEGAL SERVICES OF GREATER MIAMI, INC.  
(Firm/ Company)

4343 WEST FLAGLER STREET  
(Address)

MIAMI, FL 33134  
(City/ State and Zip Code)

valenciagunder@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANNA-BO EMMANUEL at 305 438-2441  
(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:

- |                                                     |                                                                        |                                                                                                     |                                                                                                                            |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

**AFFIDAVIT**

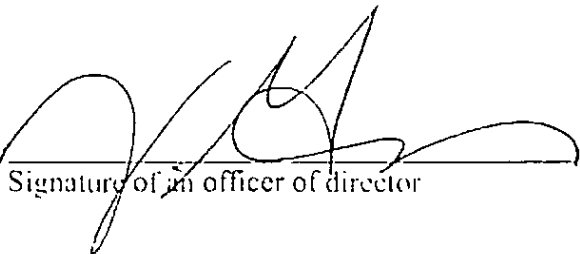
**OF**

**SMILE TRUST INC**  
**(the "Corporation")**

**AUTHORIZING THE IMMEDIATE ASSUMPTION OR USE OF NAME BY ANOTHER  
CORPORATION**

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1. The corporation making this affidavit, Smile Trust Inc, is a Florida not for profit corporation (the "Corporation").
2. The Corporations Articles of Incorporation were filed on the 11<sup>th</sup> day of February, 2019 and state that the effective date of the corporation shall be the 10<sup>th</sup> day of February, 2019.
3. The Corporation's Florida Document number is N19000001685.
4. On June 11, 2019, the board of directors of the Corporation (the "Board") resolved to dissolve the Corporation.
5. Also on June 11, 2019, the Board resolved, and the President of, and on behalf of, the Corporation hereby confirms that, following the dissolution of the Corporation, the corporation Make The Homeless Smile Miami, Inc (Florida Document number: N15000000829) shall be authorized to immediately use the name "Smile Trust Inc".
6. On June 18, 2019, the President of the Company executed and filed Articles of Dissolution pursuant section 617.1401 (3) of the Florida Statutes.
7. The Corporation makes this affidavit pursuant to the requirements of section 617.1405 (4) of the Florida Statutes.



Signature of an officer or director

\_\_\_\_\_  
President

\_\_\_\_\_  
Valencia Gunder

Articles of Amendment  
to  
Articles of Incorporation  
of

MAKE THE HOMELESS SMILE MIAMI, INC

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

N15000000829

(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 SMILE TRUST INC

*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: VALENCIA GUNDER

937 NW 3RD AVENUE

(Florida street address)

New Registered Office Address:

MIAMI

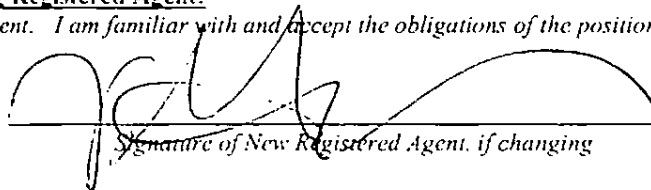
(City)

Florida 33136

(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

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>
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			_____

[illegible]

The date of each amendment(s) adoption: June 18, 2019, if other than the date this document was signed.

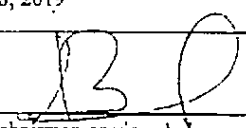
Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 June 18, 2019

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)

Anna-Bo Emmanuel

(Typed or printed name of person signing)

Attorney J. Fret

(Title of person signing)