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R. Vermit

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

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You NAME OF CORPORATION:	ng Seeds of Virtue, Inc			
N150000 DOCUMENT NUMBER:	2094			
The enclosed Articles of Amendment	and fee are submitted for fili	ng.		
Please return all correspondence conc	erning this matter to the follo	wing:		
Candice Blake				
AND STATE OF THE S	(Name of Co	ontact Person)		
	(F:/	Company)		
	(rimi/C	company)		
	2314 Greyw	vall Ave		
	(Ad	dress)		
	Ococe, FL	. 34761		
	(City/ State a	and Zip Code)		
	helpnowf1@	gmail.com		
E-mail add	ress: (to be used for future ar	nual report notifica	ation)	
For further information concerning the	s matter, please call:			
Candice Blake		352	223-5533	
(Name of	Contact Person)	(Area Coo	le) (Daytime Telephon	e Number)
Enclosed is a check for the following	amount made payable to the l	Florida Department	of State:	
	75 Filing Fee & S43.75 Fil ficate of Status Certified (Additional enclosed)	Copy Copy is Copy is Copy (A	52.50 Filing Fee extificate, of Status extified Copy additional Copy is inclosed)	
Mailing Address Amendment Section	1	Street Addre Amendment S		

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 to Articles of Incorporation of

FILED

- 16 FEB 25 PM 8: 50

SECRETARY OF STATE

(Name of Corporation as current	ly filed with the Florida Dept. of State)
Young Seeds of Virtue, Inc	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
Hands Off, Inc	The new
name must be distinguishable and contain the word "corporat "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)	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
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 new registered agent and/or the new registered office a	
Name of New Registered Agent:	N/A
New Registered Office Address:	(Florida street address)
	, Florida, (City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and accept the obligations of the position.
S	ignature 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: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	/ .	<u>Addres</u> s
1) Change	******		N/A	
Add				
Remove				
2) Change				
Add				
Remove			1	
3) Change				
Add				
Remove			ı	
4) Change				
Add				
Remove			\ .	
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				***

If amending, or adding additional Art (attach additional sheets, if necessary).	(Be specific)					
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2/24/16	
The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
2/29/16	
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	date 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 amend was/were sufficient for approval.	lment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	/were
Dated 2/24/16	
Signature Day	
(By the chairman or vice chairman of the board, president or other officer-if di have not been selected, by an incorporator – if in the hands of a receiver, trust other court appointed fiduciary by that fiduciary)	
Candice Blake	
(Typed or printed name of person signing)	
Executive Director	
(Title of person signing)	