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(Address)	20027802
(Address)	
Rickey B. Cocci	10/14/150100
8430 Black Jack	< RD



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(Document Number)

(Requestor's Name)

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October 14, 2015

RICKY B COGGINS 8430 BLACK JACK RD TALLAHASSEE, FL 32305

SUBJECT: HELPING OUR PRISONER EXCEL, INC

Ref. Number: N15000004731

We have received your document for HELPING OUR PRISONER EXCEL, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 815A00021808

Cathy A Carrothers Regulatory Specialist

www.sunbiz.org

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Helping OL	IR Prisoner	Excel INC
DOCUMENT NUMBER: N15000004		_
DOCUMENT NUMBER: 101000004	70.	
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Rickey Bernard Co	igins	
	Name of Contact Perso	n)
Helping Our Prisoner Exce	1 IN	
	(Firm/ Company)	
8430 Black Jack Rd		
, , , , , , , , , , , , , , , , , , ,	(Address)	
TALLAHASSEE FLORIDA	32305	
(City/ State and Zip Cod	e)
big (1/29@ GMAIL. Com) E-mail address: (to be used to		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please c	all:	
Rickey Bernard Coxams	at (2)	50·443·2674
Rickey Bernard Cogins (Name of Compact Person)	a_(A	rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pay	rable to the Florida Dep	artment of State:
Dan Division Date Saniti Dan D	7444 55 534 5 5	Masa sa Rivi
\$35 Filing Fee \$\Bigcup \$\subset\$\$43.75 Filing Fee & \$\Bigcup\$\$Certificate of Status		□\$52,50 Filing Fee Certificate of Status
Confidence of Status	(Additional copy is	Certified Copy
	enclosed)	(Additional Copy is
		Enclosed)
Mailing Address	Straat	Address
Amendment Section		Iment Section
Division of Corporations		on of Corporations

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

Helping OUR Prisone	Excel IN	
(Name of Corporation as	currently filed with the Flori	da Dept. of State)
N15 00000		
(Document	Number of Corporation (if known	own)
Pursuant to the provisions of section 617.1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "co Company" or "Co." may not be used in the name.	orporation" or "incorporated"	or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADD</u>		
C. Francisco moltino addinar if amiliable.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	X)	
D. If amending the registered agent and/or register	ad affina address in Florida (anter the name of the
new registered agent and/or the new registered of		the name of the
N CN D : 14		
Name of New Registered Agent:		
	(PI	rida street address)
New Registered Office Address:	(110	riaa sircei aaaress)
-	(City)	, Florida (Zip Code)
	(01.9)	(Lip Code)
New Registered Agent's Signature, if changing Regi		he obligations of the position
hereby accept the appointment as registered agent.	i am jamiliar with and accept t	ne obligations of the position.
	Signature of New Registe	ared Agent if changing
	Digitation of Hen Registe	ion ingoin, y 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: X Change X Remove X Add	<u>V</u> <u>Mi</u>	in Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change Add Remove	<u>T</u>	Krystle Coggins	8430 Black Jack Rd Tallahassee Elorida 32305
2) Change Add Remove	T	Jackie Dennis	2244 SANDRESST TAllahassee Florida 32303
3) Change Add Remove		<u> </u>	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

L. If amending or adding additional (attach additional sheets, if necessar	Articles, enter ch ry). (Be specific)	ange(s) here:			
					•
					
			e		
				. ,	<u> </u>
					
					
					
					·
					

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:	10-19-15	
<u> </u>	(no more than 90 days after amendment file do	ite)
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	opted by the members and the number of votes cast f	or the amendment(s)
There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amends.	Iment(s) was/were
	-19-15	·
	ay bernard Cossin	
have not beer	nand vice chairman of the board, president or other a selected, by an incorporator – if in the hands of a repointed fiduciary by that fiduciary)	
Rich	Ney Bernard Coggins (Typed or printed name of person sign	uing)
Pre	sident	
	(Title of person signing)	

AMENDED ARTICLE OF INCORPORATION OF HELPING OUR PRISONER EXCEL, INC

ONE:

The name and address of the principal corporation is Helping Our Prisoner Excel, Inc 8430 Black Jack Rd., Tallahassee, Florida 32305. The Corporation is organized pursuant To the State of Florida Non-Profit Corporation Code.

TWO:

This corporation is a non-profit public benefit corporation and is not organized for the private Gain of any person. The corporation is organized under the non-profit Public benefit corporation law for charitable and educational purposes. The program(s) will consist of but shall not be limited to: Recidivisim; Housing; Placement for homeless person(s); Transporation; After care; Transitional housing; Substance abuse awareness for youth at risk; Job training/Placement; Mentoring; Parenting Counseling; P.T.S.D; and other programs to aide those at risk.

THREE:

The duration of this corporation shall be perpetual, shall have no stock and shall have no members.

FOUR:

The name and address of the registered agent of the corporation shall be: Rickey B. Coggins Lucky B. Coggins , 8430 Black Jack Rd., Tallahassee, Florida 32305.

FIVE:

This corporation is organized and operated exclusively for Educational and Charitable purposes Within the section 501 (c) (3) of the Internal Revenue Code.

SIX:

Notwithstanding any other provisions of these Articles, the corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from federal income tax under Section 501 (c) (3) of the Internal Revenue Code.

SEVEN:

The property of this corporation is irrevocably dedicated to Charitable and Educational purposes And no part of the net income or assets of the organization shall ever inure to the benefit of any director, officer, or member thereof or the benefit of any private person.

EIGHT:

On the dissolution or winding up of the corporation, its assets remaining after payment of, or provision for payment of, all debts and liabilities of this corporation, shall be distributed. To a nonprofit fund, foundation, or corporation operated exclusively for Educational and Charitable purposes under Section 501 (c) (3) of the Internal Revenue Code, 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 disposed of for the court of Common

Pleas of the county in which the principal office of the organizeations, as said Court shall determine which are organized and operated exclusively for such purposes.

NINE:

The Directors are elected in accordance with the Bylaws. A Director must be at least 18 Years of age. The number of Directors shall be three (3).

Executed on 10-11-15. The name, signature and residence address of the persons Appointed to act as the initial directors and incorporator shall be:

NAME AND POSITION

RICKEY B. COGGINS

President

/s/ Richey B. Coggins 8430 Black Jack Rd.

Tallahassee, FL .32305

TERRANCE COGGINS Secertary

8430 Black Jack Rd. Tallahassee, FL. 32305