

N15000005335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

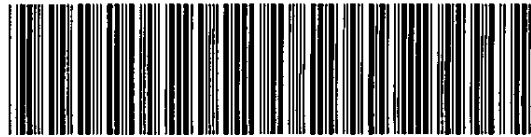
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

*Gabrielle Leao gave
authorization to make
corrections to the application
10/20
dec*

Office Use Only



400275433014

09/16/15--01020--009 **35.00

FILED
15 OCT 20 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amendment

OCT 20 2015

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Helping Hand organization INC

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Dante Stevenson
(Name of Contact Person)

Helping Hand organization INC
(Firm/ Company)

(Address)

(City/ State and Zip Code)

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

For further information concerning this matter, please call:

Dante Stevenson at 561-414-1682
(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:

- ☒ \$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

FILED
15 OCT 20 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Helping Hand organization inc

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

N15 000005335

(Document Number of Corporation (if known))

FILED
15 OCT 20 PM 2:16
TALLAHASSEE
SECRETARY OF STATE

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 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**)

9858 glades road #D3-542
boca raton, FL 33434

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:

9858 Glades Road # D3-542

(Florida street address)

New Registered Office Address:

Boca Raton

(City)

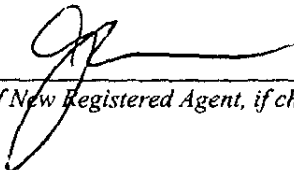
Florida

33434

(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>

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

P

Gabrielle Leao

911 SW 6th Ave

Delray Beach, FL

33444

☐ Add

☒ Remove

2) ☐ Change

~~PTD~~

Dexter Walker

9858 Glades Road

D3-542

Boca Raton, FL 33434

☒ Add

☐ Remove

3) ☐ Change

~~PTD~~

Vickie Darden

9858 Glades Road

D3-542

Boca Raton, FL 33434

☒ Add

☐ Remove

4) ☐ Change

CEO

Donte' Stevenson

9858 Glades Rd

D3-542

Boca Raton, FL 33434

☒ 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 specific)

- ① Please remove Gabrielle Leao as President, including address: 911 SW 10th Ave Delray Beach, FL 33444
- ② Please remove address and mailing address from 911 SW 10th Ave Delray Beach FL to 9858 Glades Road #D3-542 Boca Raton, FL 33434
- ③ Please add Dexter Walker and Vickie Darden as ~~editors~~ Directors with address 9858 Glades Road #D3-542 Boca Raton, FL 33434 for both address and mailing address

There should only be
Dante Stevenson
Dexter Walker
Vickie Darden
addresses
9858 Glades Road #D3-542
Boca Raton FL 33434
remove 911 SW 10th Ave completely.

The date of each amendment(s) adoption: _____, if other than date this document was signed.

Effective date if applicable: 10/15/15
(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 10/15/15

Signature Donte' Stevenson
(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)

Donte' Stevenson
(Typed or printed name of person signing)

CEO / Registered Agent
(Title of person signing)

FILED
15 OCT 20 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA