N150000011204

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SECRETARY OF STATE
FALL AHASSEF, FLORIO

A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

Operation Hope of NAME OF CORPORATION:	Гатра Вау, Іпс.
N15000011204	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this matt	er to the following:
Franklin Hills Jr.	
	(Name of Contact Person)
Operation Hope of Tampa Bay, Inc.	
	(Firm/ Company)
11104 N. 28th Street	
	(Address)
Tampa, Fl 33612	
	(City/ State and Zip Code)
tampastarshowcase@gmail.com	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	e call:
Franklin Hills Jr.	813 348-6378
(Name of Contact Person	
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
	0

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

Articles of Amendment to Articles of Incorporation of



Operation Hope of Tampa Bay, Inc.		15 DEC 11 PH 12: 21
(Name of Corporation as current	ly filed with the	Florida Dept. of State)
N15000011204		SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Document Number	er of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida No</i>	t For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
n/a		The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	ion" or "incorpo	
	n/a	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
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	e address in Flor	rida, enter the name of the
Name of New Registered Agent:		
Name of New Neglistered Agent.		
		(Florida street address)
New Registered Office 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: niliar with and ac	cept the obligations of the position.
Si	gnature of New R	egistered 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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	ones		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_	n/a	_	
Add				_	
Remove				-	
2) Change		_	.	_	
Add				-	
Remove				_	
3) Change		_		_	
Add					
Remove				_	
4) Change					
Add					
Remove				-	
5) Change					
Add		_	1371	_	
Remove				_	
6) Change		_		_	
Add				-	
Remove				_	· · · · · · · · · · · · · · · · · · ·

(attach additional sheets, if necessary). (Be specific)
Article III - The specific purpose for which this corporation is organized is:
Said organization is organized exclusively for charitable, religious, education, and scientific purposes, including, for such
purposes, the making of distributions to organizations that qualify as exempt organizations under 501(c) (3) of the Internal
Revenue Code, or corresponding section of any future federal tax code.
Article IX - Dissolution Language
Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of
of 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 public purpose. Any such assets not disposed
of shall be disposed of by a court of competent jurisdiction in the county in which the principal office of the organization is
then locate, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which
are organized and operated exclusively for such purposes.

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) adoption:		, if other than the	
date	e this document was signed		
months at the let the		December 1, 2015	
EH	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will be be be artment of State's records.	I not be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated	mber 1, 2015	
	Signature		
	(By the	e trairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Fra	anklin Hills Jr.	
	_	(Typed or printed name of person signing)	
	Pro	esident	
		(Title of person signing)	