NICOCCODOS

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JUL 1 7 2018 S. YOUNG SEORETARY OF STATE ALLAHASSEE, FLORIDA

JUL 16 AH 3:

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Grace Harhet place Charity Support Foundation	M,
DOCUMENT NUMBER: N 1600000 200 2	(,
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Arthur Stock well	
(Name of Contact Person)	
(Firm/ Company)	
3427 NW 40th Terrace	
(Address)	
Goin esuille FL 32606 (City/ State and Zip Code)	
(City/ State and Zip Code)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
1 dhu St 1 dl	
Arthur Sloct well at 352 575 8307 (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:	
S35 Filing Fee S43.75 Filing Fee SCertificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Street Address Amendment Section	
Division of Corporations Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

rticles of Incorpora of

Grace Marketplace Ch	varity Su	7 troop	Foundat	ion In	С
(Name of Corporation as cu	rrently filed with 8	<u>lle Florida Dept</u>	t. of State)		
N 16000002002					
(Document N	lumber of Corporati	on (if known)	-		
Pursuant to the provisions of section 617.1006, Florida Staamendment(s) to its Articles of Incorporation:	atutes, this Florida	Not For Profit (Corporation adop	ots the following	
A. If amending name, enter the new name of the corpo	oration:				
Chronic Homeloss Support name must be distinguishable and contain the word redre "Company" or "Co." may not be used in the name.	ort Foun	porated or the	hc. abbreviation "C	The new orp," or "Inc."	
B. Enter new principal office address, if applicable:					
(Principal office address MUST BE A STREET ADDRE	<u>:SS</u>)			750 18	
		<u> </u>		<u> </u>	=
C. Enter new mailing address, if applicable:				38.58 1.68	LED
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)				mo E	Ö
		_		0 0	
				18 5g	i •
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	office address in F	<u>lorida, enter the</u>	name of the		
new registered agent and/or the new registered offic	ce address:				
Name of New Registered Agent:					
New Registered Office Address:		(Florida street	address)		
ivew negistered Office Address.					
		<u> </u>	, Florida (Zip Cod	<u>_</u>	
	(City)		(Zip Cod	e)	
New Registered Agent's Signature, if changing Register	red Agent:				
hereby accept the appointment as registered agent. I am	ı familiar with and i	accept the obliga	itions of the posi	tion.	
	C'	<u> </u>			
	Signature of New	Kegistered Agen	t, 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		_	

·	ticles, enter chans (Be specific)					
						
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				- -	-	

The date of each amendment(s) adoption: July 10, 2018 date this document was signed.	_, if other than the
Effective date if applicable: Joly 13, 20) (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 document's effective date on the Department of State's records.	oe 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 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 July 13, 2018	
Signature Accuell, Diesi dent (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)	-
Arthur Stockwell (Typed or printed name of person signing)	
(Title of person signing)	