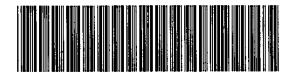
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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Luembrumo

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATIO | Heart with hope Warr | iors, Inc | | | | | _ |
|--------------------------------|---|---|-----------------------|--|--------------------|-----------|--------------|
| POCUMENT NUMBER: _ | N16000006474 | | | | | | _ |
| The enclosed Articles of Amo | endment and fee are subm | itted for filing. | | | | | _ |
| Please return all corresponde | nce concerning this matter | to the following: | | | | | |
| Kenda L White | | | | | | | |
| | (| Name of Contact Person | 1) | | | | _ |
| | | (Firm/ Company) | | | | | - |
| | | (Fillia Company) | | | | | |
| 4066 Chuck Wagon Ct | | | | | | | _ |
| | | (Address) | | · | · | | |
| Middleburg, FL 32068 | | | | | SEC: | 16 SI | _ ••••• |
| ***** | (| City/ State and Zip Code | =) | | - r1- | 9 | <u> </u> |
| hwhw@ourwhitehouse.us | | | | | 200 mm. (| -9 F | (1-m) |
| E- | mail address: (to be used | for future annual report | notification | n) | , <u>.</u> ' 'J''] | 3 | ه ي معنوع |
| For further information conce | erning this matter, please o | all: | | | | PH 12: 14 | , make |
| Kenda L White | | 90 at | 4 | 728-3778 | £ * | | _ |
| | Name of Contact Person) | (Ar | ea Code) | (Daytime Telep | hone Numb | er) | |
| Enclosed is a check for the fo | ollowing amount made pay | able to the Florida Depa | rtment of | State: | | | |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certif Certif | 0 Filing Fee ficate of Status fied Copy tional Copy is osed) | | | |
| <u>Mailing A</u> Amendmer | | | Address Iment Sect | ion | | | |

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



August 30, 2016

KENDA L WHITE 4066 CHUCK WAGON CT MIDDLEBURG, FL 32068

SUBJECT: HEART WITH HOPE WARRIORS, INC.

Ref. Number: N16000006474

We have received your document for HEART WITH HOPE WARRIORS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Diane Cushing Senior Section Administrator

Letter Number: 516A00018427

TE SEF -9 PM 8:

Articles of Amendment to Articles of Incorporation of



Heart with hope Warriors, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) N16000006474 (Document Number of Corporation (if known) 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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A (City) (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: X Change X Remove X Add | <u>V</u> <u>Mik</u> | n <u>Doe</u> e Jones y Smith | | |
|----------------------------------|---------------------|------------------------------------|-----------------|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s | |
| 1) Change | | N/A | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | N/A | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | N/A | *** | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | N/A | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | N/A | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | N/A | | |
| Add | | | | |
| Remove | | | | |

| | | , | | | | | |
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| | If amonding | or adding | additional | A metical co | | ahamaa(a) har | ••• |
| L. | II amenume | OL AGGINE | adulliunai | Arucies, | emter | change(s) her | ι. |
| | | | | | | | |

(attach additional sheets, if necessary). (Be specific)

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| NPO to enrich the lives of families affect by congenital heart disease (CHD). To provide support, comfort, life |
|---|
| fulfilling activities and a few magical miracles for heart warriors after the diagnosis. |
| No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, |
| officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable |
| compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in this |
| document hereof. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise |
| attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or |
| distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. |
| Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted |
| to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, |
| or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible |
| under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code. |
| |
| Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of |
| section 501(c)(3) of the Internal Revenue Code, or the 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 so |
| disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the |
| corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall |
| determine, which are organized and operated exclusively for such purposes. |
| |
| |
| |

| The date of each amendment(s) adoption: | , if other than the |
|--|-------------------------------------|
| date this document was signed. | |
| 08/08/2016 Effective date if applicable: | |
| (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, document's effective date on the Department of State's records. | this 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 ar was/were sufficient for approval. | nendment(s) |
| There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors. | was/were |
| Dated 08/08/2016 | |
| Signature Juna Wllut | |
| (By the chairman or vice chairman of the board, president or other officer- have not been selected, by an incorporator – if in the hands of a receiver, other court appointed fiduciary by that fiduciary) | |
| Kenda L White | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |