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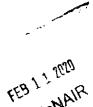


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COVER LETTER

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TO: Amendment Section Division of Corporations	The state of the s	My Constitution of the Con
Tent City Helpers, Inc. NAME OF CORPORATION:		My The
N16000006580 DOCUMENT NUMBER:		٠٠,
The enclosed Articles of Amendment and fee are submitted	d for filing.	
Please return all correspondence concerning this matter to t	the following:	
Roberta Lynn Scott		
(Nan	me of Contact Person)	
Tent City Helpers, Inc.		
((Firm/ Company)	
2736 SW Willowood Cir		
	(Address)	
Palm City, FL 34990		
(City	// State and Zip Code)	
tenteityhelpers@yahoo.com		
E-mail address: (to be used for f	uture annual report notification)	
For further information concerning this matter, please call:		
Roberta Lynn Scott	772 631-1233	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable	e to the Florida Department of State:	
(Ac	.75 Filing Fee &	
Mailing Address Amendment Section	Street Address Amendment Section	
rinemanical accion	AMOURING IN SECTION	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

Articl	les of Incorporation	· //
T . C . II	of	<i>₹</i> ,
Tent City Helpers, Inc.		J.
Name of Corporation as currently filed with the Florida	Dept. of State)	
N16000006580		9
(Document Num	nber of Corporation (if know	m)
ursuant to the provisions of section 617,1006, Florida Statu mendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Pr</i>	m) rofit Corporation adopts the following
If amending name, enter the new name of the corpora	ation:	
n∕a		
name must be distinguishable and contain the word "corpore Company" or "Co." may not be used in the name.	ation" or "incorporated" or	r the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	2736 SW Willowood Cir	
Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>S</u>) Palm City, FL 34990	
	 	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2736 SW Willowood Cir	
	Palm City, FL 34990	
. If amending the registered agent and/or registered offi	ice address in Florida, ente	er the name of the
new registered agent and/or the new registered office a	address:	
Name of New Registered Agent: Roberta	Lynn Scott	
2736 SW	Willowood Cir	
	(Florida	street address)
New Registered Office Address:		
Palm City	у	, Florida <u></u>
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered	l Agent:	
nereby accept the appointment as registered agent. I am fa	miliar with and accept the o	obligations of the position.
	Colet Lynnignature of New Red Sured	Seatt
Si	ignature of New Registered	Agent, if changing

Page 1 of 4

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>Mike</u>	a Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>C</u>	Stacey Solomon	2394 SW Estella Ter Palm City, FL 34990
× Remove			
2) Change Add	<u>VC</u>	Richard Bolton	3746 SW Margolo Ln Palm City, FL 34990
* Remove 3) Change Add * Remove	<u>T</u>	Marianne White	Jensen Beach, FL 34957
4) Change Add	P	Roberta Lynn Scott	2736 SW Willowood Cir Palm City, FL 34990
Remove 5) Change	VP	Gail Harvey	900 NW Waterlily Pl Jensen Beach, FL 34957
6) Change Add	TS	Octavio Reis	900 NW Waterlily Pl Jensen Beach, FL 34957
Remove Page 2 of 4 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
n/a			

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Page 3 of 4	
The date of each amendment(s) adoption: 01.01.2020	, if other than the
ate this document was signed.	
01.01.2020	
Affective 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,	this date will not be listed as the
ocument'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 memiadopted by the box	bers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
Dated	01.01.2020
Signature	Molyno
ı	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)
	Stacey Solomon
	(Typed or printed name of person signing)
	Chairman
	(Title of person signing)