

N 16 000010816

(Requestor's Name)

(Address)

(Address)

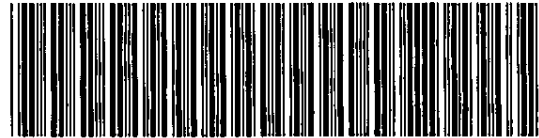
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



000292958960

11/28/16--01053--001 **1.00

12/07/16--01021--002 **84.00

Special Instructions to Filing Officer:

Ivette Ramos Celestri
gave permission to
check box for DC
B/O/Dir. w/o members. 12/20/16

Office Use Only

DEC 7 AM 9:15
STATE OF NEW YORK

DEC 20 2016

D CONNELL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Chaplain's International Institute of Hope Inc.

DOCUMENT NUMBER: N16000010816

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

Please return all correspondence concerning this matter to the following:

Ivette Ramon Celestini

(Name of Contact Person)

Hope Central Inc.

(Firm/ Company)

5802 Makoma Dr Ste #2

(Address)

Orlando, FL 32837

(City/ State and Zip Code)

hopeiscentral@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ivette Ramon Celestini

(Name of Contact Person)

407-300-0019

(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
encl)

\$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

We Have Not Received the Certificate of
Status - He paid Too much he
should of paid ~~52.50~~ \$43.75 we need.
2-1-20 3/1/25



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2016

IVETTE RAMOS CELESTRIN
5802 MAKOMA DR #2
ORLANDO, FL 32839

SUBJECT: CHAPLAINS INTERNATIONAL INSTITUTE OF HOPE INC.
Ref. Number: N16000010816

We have received your document and check(s) totaling \$1.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$34.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

PAGE 4 OF 4 MUST BE COMPLETED IN ORDER FOR THE DOCUMENT TO BE FILED.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Darlene Connell
Regulatory Specialist III

Letter Number: 216A00025424

Dear Sir or Madam,

This letter is concerning Chaplain's International Institute of Hope, Doc# N16000010814.

As per a conversation with I believe was Dorothy, we had to send in check or money order for \$34.00 in order for the changes to be made, we want the Director Carlos Alvarez be deleted from organization, and here is the last page of the amendment also. Appreciate all your assistance.

Truly yours.

Luette Romo Celestini
Agent.

Articles of Amendment
to
Articles of Incorporation
of

Chaplaens International Institute of Hope Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

(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:

_____ 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**)

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: _____

(Florida street address)

New Registered Office Address: _____

(City)

Florida

(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

Page 1 of 4

Signature of Agent: Luette Rama Celestini

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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	PT P	Carlos Alvarez	845 Grand Regency Point Altamonte Springs FL 32714
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

This is only change

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Please use our credit the 34.25
to make this change, and I
am sending a check for .75
to add up to the \$35 fee to
amend.

Thank you

Lueta Romo Electric

P.S. Instead I sent \$1.00

Thank you

The date of each amendment(s) adoption: 11-28-16, if other than the date this document was signed.

Effective date if applicable: 11-30-16
(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 11/30/16

Signature Miguel Trizarray
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Miguel Trizarray
(Typed or printed name of person signing)

President
(Title of person signing)

The date of each amendment(s) adoption: 11-28-16, if other than the date this document was signed.

Effective date if applicable: 11-30-16
(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 11/30/16

Signature Miguel Trizarray
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Miguel Trizarray
(Typed or printed name of person signing)

President
(Title of person signing)