

NH000002536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

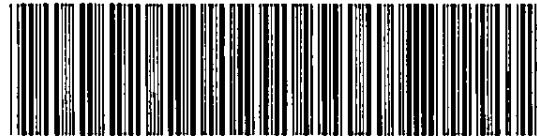
(Document Number)

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Certificates of Status ☒

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08/03/17--01028--006 **43.75

S TALLENT

AUG 17 2017

Amend

FILED
17 AUG -9 PM 5:00
CLERK OF SUPERIOR COURT
JULIA ROBERTSON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HLM CHARITY FOUNDATION CORP.

DOCUMENT NUMBER: N17000002536

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

Please return all correspondence concerning this matter to the following:

HELEN LAMB MCLEAN

(Name of Contact Person)

HLM FOUNDATION CORP.

(Firm/ Company)

165 SW KANNER HWY

(Address)

STUART, FLORIDA 34997

(City/ State and Zip Code)

MARK.CROMLEY@AOL.COM

/ DIRECTOR

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

For further information concerning this matter, please call:

MARK ANDREW CROMLEY

772

872-1571

at

(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:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$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

Articles of Amendment
to
Articles of Incorporation
of

HLM CHARITY FOUNDATION CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

N17000002536

(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

FILED

17 AUG - 9 PM 5:00
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

(Attach additional sheets, if necessary)

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.

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
X Add	SV	Sally Smith

Address

6) ____ Change _____
 ____ Add _____
 ____ Remove _____

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

ALL OTHER CHANGES MUST BE APPROVED BY HELEN LAMB MCLEAN//CHAIRMAN AND REGISTERED AGENT,

8/7/2017

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

8/7/2017

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, 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.

7/30/2017

Dated _____

Signature _____

Helen L. McLean
(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)

HELEN LAMB MCLEAN

(Typed or printed name of person signing)

CHAIRMAN OF BOARD/REGISTERED AGENT

(Title of person signing)

State of FL
County of St. Martin
On this 5th day of August
before me personally appeared Helen L. McLean & Mark Cromley
to me known to be the person who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

SEAL (signed) _____

NOTARY PUBLIC

