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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: INFINITE BEGINNINGS 013880000011N DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: heree Richardson-Mikkenz (Name of Contact Person) NIA (Firm/ Company) 1) evonshi Re (Address) acksonville (City/ State and Zip Code) Infinite beginningsfoodbank E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (Daytime Telephone Number) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee \$343.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee . Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section Disision of Corporations Division of Corporations -P30&Box 6327 Clifton Building -Tällähassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Incorporation of (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) (Suant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the follow endment(s) to its Articles of Incorporation: If amending name, enter the new name of the corporation: Nfiwte Deginning Food Cantry Incorporated or the abbreviation "Corp." or "Incorporated" or the abbreviation "Corp." or "Incorporated of the abbreviation or "Incorporated of the abbreviation or "Incorporated of the abbreviation of				1
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WHAT Signature, if changing Registered Agent:	-		(Florida street address)	
(City) (Zip Code) w Registered Agent's Signature, if changing Registered Agent:	<u>New Registered Office Address</u> :	~ 1 1 V		
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			ecept the obligations of the positio)Ħ.

Signature of New Registered Agent, if changing

address, of each Offic (Attach additional she Please note the officer P = President: V= Vic Executive Officer; CF held. President, Treas	er and/or Direct ets, if necessary) Adirector title by the President: T= O = Chief Financ arer, Director wa	or being added: the first letter of the office title; Treasurer; S= Secretary; D= Director; TR= cial Officer. If an officer/director holds more ould be PTD.	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is
	leaves the corpor	ration, Sally Smith is named the V and S. The	se should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>V</u> <u>Mil</u>	n <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	ST	Wendell L Reed	3234 Liberty Cir Jacksonville FL 32206
Remove 2) Change Add			
Remove 3) Change Add Remove			
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Page 2 of 4

(attach additional sheets, if necessary). (Be specific)
Pursuant to the provision of aection 617,1002 and 617,006, Ronda Strikess, the under signed Reside nonprotes coeparation adopts the billioning articles of animalment to its articles of incorporation.
Sald organization is organized exclusively for charitable, religious, educational, or scientific purposes.
including, for such purposes, the making of distributions to organizations that qualify as exempt
organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any
future tax code.
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes
within the meaning of section 501(c)(3) of the Internal Revenue Code, or 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 disposed of shall be disposed of by a
court of competent jurisdiction in the county in which the principal office of the organization 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.

October 162011	_, if other	than the
The date of each amendment(s) adoption:		
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 document's effective date on the Department of State's records.	e listed as	s 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.		
Signature (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) (Typed or printed name of person signing)	_	
Vice President (Title of person signing)		