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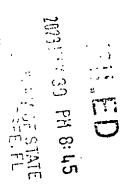
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R. HUNT OS/30/23

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Helping Hands Fund, Inc.
17053-356-30003	1-7
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
Pam Dolan	
	(Name of Contact Person)
U.S. Lawns Helping Hands Fund, Inc.	
	(Firm/ Company)
6700 Forum Drive, Suite 150	
	(Address)
Orlando, FL 32821	
	(City/ State and Zip Code)
pam.dolan@uslawns.net	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	, please call:
Pam Dolan	407 496-6447 at
(Name of Contact	
Enclosed is a check for the following amount a	made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of \$	Fee & \$\Bigsquare\$\$\$ \$\Bigsquare\$\$\$ \$\Bigsquare\$\$ \$Certified Copy (Additional copy is enclosed) \$\Bigsquare\$\$\$ \$\Bigsquare\$\$\$ \$\Bigsquare\$\$\$ \$Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Document No	umber of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profi	it Corporation adopts the f	ollowing
A. If amending name, enter the new name of the corpo	oration:		
	·		The new
name must be distinguishable and contain the word "corp "Company" or "Co," may not be used in the name.	poration" or "incorporated" or th	he abbreviation "Corp." or	"Inc."
3. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>:SS</u>)	:) 22
			7
		The same of the sa	~:
Enter new mailing address, if applicable:		it h	30
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		- <u> </u>	
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		PA	ر ق
		<u> </u>	
). 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 offi	<u>ce address:</u>		
Name of New Registered Agent:			
			
	(Florida sti	reet address)	
New Registered Office Address:			
		, Florida	
	(City)	, Florida (Zip Code)	
	(City)		

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	PT John Do V Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) × Change Add	<u>S/D</u>	David Wells	6700 Forum Drive, Suite 150 Orlando, FL 32821
Remove			
2) Change Add	T/D	Melissa Fry	6700 Forum Drive, Suite 150 Orlando, FL 32821
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
(attach additional shee		cles, enter change(s) here: (Be specific)	
Not Applicable			- · · · - · - · · - · · · · · ·
			

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Not Applicable	
The date of each amendment(s) adoption: Not Applicable	than the
Not Applicable	
Effective date if applicable: Not Applicable (no more than 90 days after amendment file date)	
(no more than 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.	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.	

adopted by the board	of directors.
Dated	flay 24, 2023
Signature	Pour Johan
(By	with chairman or vice chairman of the board, president or other officer-if directors are not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	Pam Dolan
	(Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were