## M1700000 4351

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Teen Mother NAME OF CORPORATION:	Choices Inc.
N17000004351 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
Angela Ball	
-	(Name of Contact Person)
Hearts For Moms, Inc.	
	(Firm/ Company)
5343 Northlake Boulevard	
	(Address)
Palm Beach Gardens, Florida 33418	
	(City/ State and Zip Code)
angela@heartsformoms.org	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	r, please call:
Angela Ball	(561) 236-8489
(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 Certificate of	
Mailing Address Amendment Section	Street Address Amendment Section

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

Teen Mother Choices Inc.

Name of Corporation as currently filed with the Florid	la Dept. of State)	
N17000004351		
(Document Nu	mber 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 Pro	ofit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
Hearts for Moms Inc.		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated" or	the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u> )	
		2021
		مورد آراد
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Matting daties) MAT BE A FOST OF FICE BOX)	•	Apr.
D. If amending the registered agent and/or registered	office address in Florida, ente	er the name of the
new registered agent and/or the new registered office		
Name of New Registered Agent:		
New Business I (March 11)	(Florida :	street oddress)
New Registered Office Address:		
	(City)	, Florida (Zip Code)
	(City)	(z.ip c.ode)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		obligations of the position.
	Signature of New Registered .	Agent, if changing

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>PT</u> <u>V</u> <u>SV</u>	John De Mike Jo Sally Sr	ones en	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change Add	D	-	Christa March	6403 Barn Swallow Ct Gurnee, II, 60031
X Remove				
2) Change Add		_		
Remove 3 ) Remove Add Remove		-		
4) Change Add		_		
Remove				<del></del>
5) Change Add		-		
Remove				
6) Change Add		-		
Remove				
E. If amending or additional sheet			cles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption:	r than the
Effective date if applicable:  (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
$\underline{\textbf{Note:}} \ \ \textbf{If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.}$	as 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.	

re no members or members entitled to vote on the amendment(s). The amendment(s) was/were I by the board of directors.
4/10/2020
Dated
Signature Chell Ball
(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)
Angela Ball
(Typed or printed name of person signing)
President
(Title of person signing)