## N17000008522

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(Cit	y/State/Zip/Phon	e #)
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FILED SECRETARY OF STAIN DIVISION OF CORPORATION

JUN 11 2018 C LICNAIR

## COVER LETTER

TO: Amendment Section Division of Corporations



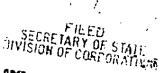
2818 JUN -7 AM II: 18

NAME OF CORPORATION:	sing Humanity, Inc.			
DOCUMENT NUMBER:	08522		<del>.</del>	
The enclosed Articles of Amendment	and fee are submitted fo	r filing.		,
Please return all correspondence conce	erning this matter to the	following:		
	Lisa Y	. Shorts Pitell		
	(Name	of Contact Person)		-
	Pitell	Law Firm, PL		
	(Fig	rm/ Company)		
	РО В	ox 5148		
		(Address)	· <u></u>	
	Nicev	ille, F 32578		
	(City/ S	tate and Zip Code)		
	tředoneza	k1@gmail.com		
E-mail add	ress: (to be used for futu	re annual report no	tification	1)
For further information concerning thi	s matter, please call:			
Lisa Y Shorts Pitell		850 at		897-0045
(Name of	Contact Person)		a Code)	(Daytime Telephone Number)
Enclosed is a check for the following a	amount made payable to	the Florida Depart	ment of	State:
		ied Copy tional copy is	Certif Certif	0 Filing Fee leate of Status led Copy tional Copy is osed)
Mailing Address		Street A	ddress	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



HOUSING HUMANITY, INC.

2818 JUN -7 AM 11: 18

(Name of Corporation as cu . N17000008522	irrently filed with the Florida Dept. of State)
	Number of Corporation (if known)
•	tatutes, this Florida Not For Profit Corporation adopts the followin
amendment(s) to its Articles of Incorporation:	tatutes, tills Florida (voi For Froja Corporation adopts the followin
A. If amending name, enter the new name of the corp	oration:
FOUNDATIONS OF HOPE, INC.	The nev
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRI</u>	ESS )
	<del></del>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered off</li> </ol>	
	<del></del>
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
_	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I a	ered Agent: am familiar with and accept the 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	PT         John D           V         Mike J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3)Change			
Add			
Remove 4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			

	ets, if necessary).					
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May 2, 2018 The date of each amendment(s) adoption:	, if other than th
late this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amend was/were sufficient for approval.	lment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	:/were
Dated May 2, 2018	
Signature VEOUS / NUNC	<del></del>
(By the chairman or vice chairman of the board, president or other officer-if di have not been selected, by an incorporator – if in the hands of a receiver, trust other court appointed fiduciary by that fiduciary)	
Craig J. Kruse	
(Typed or printed name of person signing)	
President	
(Title of person signing)	