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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPORATION:	anta Rosa County FL, Ir		
DOCUMENT NUMBER: N17000008694		■ Y/a → ₹1 å + 11 √	
The enclosed Articles of Amendment and fee ar	re submitted for filing.		
Please return all correspondence concerning this	s matter to the following:		
Brandi Winkleman			
	(Name of Contact	Person)	<u> </u>
A HOPE, Inc			
	(Firm/ Compa	iny)	
P.O. Box 4629			
	(Address)		 -
Milton, FL 32572			
	(City/ State and Z	p Code)	
ahope4src@gmail.com			
E-mail address: (to be	e used for future annual	report notifica	tion)
For further information concerning this matter, p	blease call:		
Brandi Winkleman		850 at	3682858
(Name of Contact P			e) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florid	a Department	of State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of St	ce & \$\Bar{\text{\$\subset}\$\$\$ \$43.75 Filing Formulatus Certified Copy (Additional copenclosed)	Cer y is Cer (Ac	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is closed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	!	Street Addres Amendment Se Division of Co Clifton Buildin	rporations

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A HOPE for Santa Rosa County FL, Inc

(Name of Corporation as curre	ently filed with the F	lorida Dept. of State)		_
N17000008694				
(Document Num	nber of Corporation (if	f known)		_
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not</i>	For Profit Corporation	adopts the followin	ıg
A. If amending name, enter the new name of the corpora	ation:			
A HOPE, Inc			The nev	4,
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorpora	ted" or the abbreviation		
B. Enter new principal office address, if applicable:	N/A			
(Principal office address MUST BE A STREET ADDRESS	Σ)			-
			· · · · · · · · · · · · · · · · · · ·	_
				_
C. Enter new mailing address, if applicable:			20 1	
(Mailing address MAY BE A POST OFFICE BOX)	N/A			
			- A	ŀ
		-	3 8	÷
		-	<u>v</u> c ¬o [Ĭ
D. If amending the registered agent and/or registered off	fice address in Florid	la, enter the name of th	ကြင့် ယူ	ا نس
new registered agent and/or the new registered office				
N/A Name of New Registered Agent:				
		· · · · ·		-
		(Florida street address)	<u> </u>	-
New Registered Office Address:	·	, ,		
N/A		, Florid	а	
	(City)		Code)	-
New Registered Agent's Signature, if changing Registered	d Agent			
hereby accept the appointment as registered agent. I am fo		pt the obligations of the	position.	
	Signature of New Reg	istered Agent, if changin	lg	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 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>V</u> <u>Mike</u>	<u>Doe</u> c Jones v Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	TC	Linda Maguire	4346 Garcon Point Rd
Add X Remove			Milton, FL 32583
2) Change	TCFO	Brittany Gansmann	4608 LaQuinta Ct
X Add			Pace, FL 32571
Remove 3) $\frac{X}{Change}$	PDCEO	Brandi Winkleman	5764 Charlene Dr
Add Remove			Milton, FL 32583
4) Change Add	<u>C</u>	Becky Palmer	2344 Ten Mile R Pace FL. 32571
Remove	<u> </u>	Sarah Albrecht	<u></u>
5) Change Add Remove	<u> </u>	Sayan Morech	5032 Chumuckla Pace, Fl 32571
6) Change Add Remove			

N/A					
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E. If amending or adding additional Articles, enter change(s) here:

	•	7/1/19	
The	date of each amen	idment(s) adoption:	, if other than th
date	this document was	signed.	
		7/1/19	
Eff	ective date if applic		
211	<u></u>	(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requiremente on the Department of State's records.	nts, this date will not be listed as the
Ade	option of Amendmo	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for the tor approval.	ie amendment(s)
	There are no meml adopted by the box	bers or members entitled to vote on the amendment(s). The amendment and of directors.	nt(s) was/were
	Dated	7/15/19	
	0 :		
	Signature		
	•	(By the chairman or vice chairman of the board, president or other off-	cer-if directors
		have not been selected, by an incorporator - if in the hands of a receive	/er, trustee, or
		other court appointed fiduciary by that fiduciary)	
		\bigcirc	
		Brandi Winkleman	
		(Typed or printed name of person signing)	
		President	

(Title of person signing)