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Namechs

OCT 0 6 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section

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Division of Corporations

Horses Give Hope Education Foundation Inc NAME OF CORPORATION:

DOCUMENT NUMBER: _

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

+ letchel of Contact Person) nd<u>ation</u>, GTO E-mail address: (10 be used for future annual report notification) For further information concerning this matter, please call;

Pletcher

(Name of Contact Person)

Area Code) (Daytime Telephone Number)

Enclosed is a gheek for the following amount made payable to the Florida Department of State:

🗹 \$35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & Certificate of Status

Certified Copy (Additional copy is enclosed)

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

□\$52.50 Filing Fee Certificate of Status Centified Copy (Additional Copy is Enclosed)

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



_The new

Articles of Amendment to Articles of Incorporation of

HORSES GIVE HOPE EDUCATION FOUNDATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N17000009677

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

HORSES GIVE HOPE EDUCATIONAL FOUNDATION, INC.

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." <u>"Company" or "Co." may not be used in the name</u>.

B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)

- C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)
- D. 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 office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

Florida _____ (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

(Citv)

B 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, (fnecessary)

.

Please note the officer/director title by the first letter of the office title:

P = President; F = Vice President; T = Freasurer; S = Secretary; D = Director, TR = Trustee, C = Chairman or Clerk; TEO = Chief Executive Officer; CFO = Chief Financial Officer, If an afficer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PT.

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Solty Smith is named the V and S. These should be noted as John Doc, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SY as an Add.

Evample, <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PT <u>V</u> SV	John Doe Mike Jones Sally Scotth	
<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Namy</u>	<u>Addres</u> s
1) Change Add	- <u></u>		
Remove			
2) Change Add			
Add			
4) Change Add			
Remove			
Add Remove			
6) Change			
Remove		Page 2 of 4	

E. If amending or adding	additional Articles	, enter change(s) here:
Consume additional above	if an an an annual (B	a annaifial

-

(attach additional sheets, if necessary). (Be specific)

. . .

_____ ____ ___ ____ ____ _____ ____ ----____ _____ _____. ____ ____ _____

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The date of each amendment(s) adoption:, if other than, if other than, if other than, if other than	the
Effective date if applicable: July 21 2017 (no more than 90) days ofter amendment file dates	— -

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- Θ 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.

10/3 12017 Dated HECK Signature

(By the chartman or vice chairman of the board, president or other officer-if directors have hot 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)

Director Secretary

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