## MITDDDD12316

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Xpressions of the Hea	rt Inc			
N17000012316				
DOCUMENT NUMBER:		<del></del>		
The enclosed Articles of Amendment and fee are subn	nitted for filing.			
Please return all correspondence concerning this matter	to the following:			
Dana D Mackey				
	(Name of Contact Person	)	<u> </u>	
Expressions of the Heart Inc				
	(Firm/ Company)			
P O Box 7026				
<del></del>	(Address)			
Seffner, FL 33584				
(	City/ State and Zip Code	•)		
ddmmusic@aol.com				
E-mail address: (to be used	for future annual report n	otification	1)	
For further information concerning this matter, please of	call:			
Dana D Mackey	813		766-3262	
(Name of Contact Person)	atat	ea Code)	(Daytime Telephone Numb	er)
Enclosed is a check for the following amount made pay	rable to the Florida Depa	rtment of	State:	
■ \$35 Filing Fee	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations	Amend	Address ment Secti n of Corpo		

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

A STATE OF THE PARTY OF THE PAR Xpressions of the Heart Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N17000012316 (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: Expressions of the Heart Inc The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A (Zip Code) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam 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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally St	ones .	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change				
		<b>_</b>		
Add Remove				-
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articl (attach additional sheets, if necessary).	(Be specific)
N/A	
	<u>.</u>
	<u> </u>

	12/13/17	
The date of each amendment(	(s) adoption:	_, if other than the
date this document was signed.		
	01/02/18	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	pe listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.	
Dated	2-28-17	
Signature	Nana D. Marker	
(By the have no	chairman or vice chairman of the board, pressent or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
Dan	a D. Mackey	
<del></del>	(Typed or printed name of person signing)	
PS		
	(Title of person signing)	