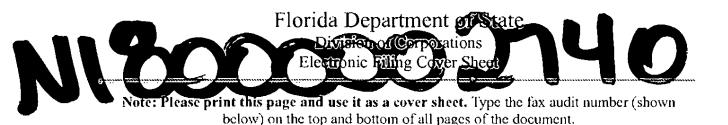
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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.

Account Number : I20010000025 Phone : (786)899-2235 Fax Number : (305)935-9042

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: kleopold@leopoldkorn.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN Ξ SERVING HANDS COMMUNITY DEVELOPMENT CORPORATION

Certificate of Status	0
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4.

Articles of Amendment to Articles of Incorporation of

	Dept. of State)	
	118000002740	
(Document Numi	per of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida Statut mendment(s) to its Articles of Incorporation:	es, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	<u>tion:</u>	
		The nev
name must be distinguishable and contain the word "corpord" Company" or "Co." may not be used in the name.	ntion" or "incorporatea	" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRESS</u>	()	
		2 28
		2020 J
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		Since Since
		
		<u> </u>
The second control of	ta and the second of	enter the name of the
 If amending the registered agent and/or registered offi new registered agent and/or the new registered office; 		enter the name of the
	<u> </u>	
Name of New Registered Agent:		
New Registered Office Address:	(Flo	orida street address)
		Florida (Zip Code)
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fa	miliar with and accept.	the obligations of the position.

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 a change, Mike Jones lea Mike Jones, V as Remove	ves the corporatio	n, Sally Smith is named the \emph{V} and \emph{S} . These sh	PST and Mike Jones is listed whe V. There is nould be noted as John:Doe, Bas a Change,
Example: X.Change X. Remove X. Add	PT John Do V Mike Jo SV Sally Sr	nes	TO BE THE
Type of Action (Check One)	Title	Name	Address FIG. 36
1) X Change Add	VP,D	JONATHAN FOREMAN	500 NW 2ND AVENUE, #11335 MIAMI, FL 33101
Remove 2) Change Add	D,S	FRANK JULIANO	500 NW 2ND AVENUE, #11335 MIAMI, FL 33101
Remove Change Add Remove	<u>D</u>	LUTHER McKINSTRY III	500 NW 2ND AVENUE, #11335 MIAMI FL 33101
4) Change Add	D,S	NATASHA CHRISTIAN	500 NW 2ND AVENUE, #11335 MIAMI FL 33101
X Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet)	ng additional Articus, if necessary).	cles, enter change(s) here: (Be specific)	
		-	

Adoption of Amendment(s)

was/were sufficient for approval.

Effective date if applicable: (no more than 90 days after amen	dment file date) y filing requirements, this date will not be listed as the
The date of each amendment(s) adoption: date this document was signed.	
	LI6 PH 6: 36 AHASSEE, FL
	SECRITAL TARES
· · · · · · · · · · · · · · · · · · ·	

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

Dated	June 30, 2020
Signatu	e_Aaron Jordan
	(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)
	Aaron Jordan
	(Typed or printed name of person signing)

2020 IIII 16 PH 6: 2