

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



000319147650

10/15/18--01016--009 ++35.00

And

R. WHITE OCT 23 2018 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

Beli NAME OF CORPORATION:	eve In The Children, Inc		
N180000 DOCUMENT NUMBER:	08782		
The enclosed Articles of Amendment			
Please return all correspondence conc	_		
Patti J Jennings			
	(Name of Con	act Person)	
Believe In The Children, Inc			
	(Firm/ Co	mpany)	
11809 W Riverhaven Dr			
	(Addr	ess)	
Homosassa, FL, 34448			
·	(City/ State and	I Zip Code)	
patti,jennings@believeinthechildren.e	org		
E-mail add	ress: (to be used for future annu	al report notification	1)
For further information concerning thi	s matter, please call:		
Patti Jennings		(815) 482-12	1
(Name of	Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following	amount made payable to the Flo	orida Department of	State:
	75 Filing Fee & S43.75 Filin Ticate of Status Certified Co (Additional of enclosed)	py Certif copy is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)

Mailing Address

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

Street Address

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

Articles of Amendment to Articles of Incorporation of

FILED

2018 OCT 15 AM 5: 45

Believe In The Children, Inc.		SECRETTERM OF STATE
	urrently filed with the Flo	SECRETARY OF STATE Prida Dept. of State AHASSEE, FL
N18000008782		
(Document	Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida 5 amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not F</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporate	The new ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	
	 .	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		a, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(1	Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist thereby accept the appointment as registered agent. It		of the obligations of the position.
	C. All D.	
	 Signature of New Regi. 	stered 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>V</u> <u>Mil</u>	<u>n Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Richard Douglas Jennings	11809 W Riverhaven Dr
			Homosassa, Fl., 3-4-48
Add X Remove			
2) Change	VP. D	Jeffery Eugene White	1514 W. Lincoln Blvd
Add			Freeport, IL. 61032
Remove	T, D	Stacey Voss Bolen	10 0 534 N Rock City Road
3) Change			German Valley, IL. 61039
Add Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
	
	
	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	
· · · ·	

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Department of the Department	k does not meet the applicable statutory filing requirements, this date will not artment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)	
Signature Signature (By the chairty have not beef other court approximation)	fan or vice chairman of the board, president or other officer-if directors a selected, by an incorporator – if in the hands of a receiver, trustee, or prointed fiduciary by that fiduciary) ings, President (Typed or printed name of person signing)	
	(Title of person signing)	