

N190000000791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

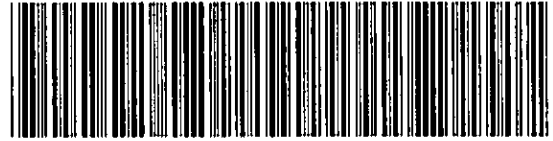
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2020 JUN 22 PM 5:48
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 JUN 22 PM 2:17

May 29, 2020

DEREK HUNTER
7041 PEMBROKE ROAD
SUITE 2
HOLLYWOOD, FL 33023

SUBJECT: REAL IS RARE CHARITY INC.
Ref. Number: N19000000791

We have received your document and check(s) totaling \$112.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P20000016927- ALL MONEY INVESTED ASSOCIATES INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore
Regulatory Specialist II

Letter Number: 620A00010668

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: REAL IS RARE CHARITY INC.

DOCUMENT NUMBER: N19000000791

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

Please return all correspondence concerning this matter to the following:

DEREK HUNTER

(Name of Contact Person)

ALL MONEY INVESTED ASSOCIATES INC.

(Firm/ Company)

7041 PEMBROKE ROAD, SUITE: 2

(Address)

HOLLYWOOD, FL 33023

(City/ State and Zip Code)

A.M.I. ASSOCIATES HOLDINGS @GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEREK HUNTER

(Name of Contact Person)

at 786-499-1385

(Area Code) (Daytime Telephone Number)

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

- | | | | |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$52.50 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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

2020 JUN 22 PM 5:48

REAL IS NAME CHARITY INC.

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

TALLAHASSEE, FL.

N19000000791

(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:

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.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7041 PEMBROKE ROAD

SUITE: 2

HOLLYWOOD, FL 33023

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME

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:

DEREK HUNTER

7041 PEMBROKE ROAD, SUITE: 2

(Florida street address)

New Registered Office Address:

HOLLYWOOD

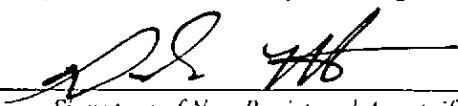
(City)

Florida 33023

(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

☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 3-11-2020

Signature 

(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)

DEREK HUNTER
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)