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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** ALIGNMENT OF LOVE, INC

**DOCUMENT NUMBER:** N19000001851

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

Please return all correspondence concerning this matter to the following:

LISA R. MURPHY

(Name of Contact Person)

ALIGNMENT OF LOVE, INC

(Firm/ Company)

1291 BIMINI LN

(Address)

RIVIERA BEACH, FL 33404-2770

(City/ State and Zip Code)

ALIGNMENTOFLOVE@GMAIL.COM

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

For further information concerning this matter, please call:

LISA R. MURPHY

561

701-2116

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

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

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

ALIGNMENT OF LOVE, INC

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

N19000001851

(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:

N/A 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**)

C. Enter new mailing address, if applicable:

(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:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

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

**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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>x</u> Change <u>    </u> Add  <u>    </u> Remove	<u>VT</u>	<u>LISA R. MURPHY</u>	<u>1291 BIMINI LN</u> <u>RIVIERA BEACH, FL 33404</u>
2) <u>    </u> Change <u>x</u> Add  <u>    </u> Remove	<u>S</u>	<u>FLORENCE A. MURPHY</u>	<u>1291 BIMINI LN</u> <u>RIVIERA BEACH, FL 33404</u>
3) <u>    </u> Change <u>x</u> Add <u>    </u> Remove	<u>C</u>	<u>GEORGE T. MURPHY</u>	<u>1291 BIMINI LN</u> <u>RIVIERA BEACH, FL 33404</u>
4) <u>x</u> Change <u>    </u> Add  <u>    </u> Remove	<u>PD</u>	<u>KYLE E. MALCOLM</u>	<u>1291 BIMINI LN</u> <u>RIVIERA BEACH, FL 33404</u>
5) <u>    </u> Change <u>    </u> Add  <u>    </u> Remove	<u>    </u>	<u>    </u>	<u>    </u> <u>    </u>
6) <u>    </u> Change <u>    </u> Add  <u>    </u> Remove	<u>    </u>	<u>    </u>	<u>    </u> <u>    </u>

**E. If amending or adding additional Articles, enter change(s) here:**

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

ALIGNMENT OF LOVE, INC is a non-profit corporation and shall be operated exclusively for  
educational and charitable purposes within the meaning of Section 501 (c)(3) of the Internal Revenue Code of 1986  
or the corresponding section of any future Federal tax code. More specifically, ALIGNMENT OF LOVE, INC  
is dedicated to relieving the poor, distressed, homeless, underprivileged by offering  
humanitarian assistance, educational support for the purpose of improving or developing their capabilities resulting in being

being beneficial for the community implementing the word of God as the foundation.

The mission of the Alignment of Love, Inc is dedicated to relieving the poor, distressed, homeless and underprivileged by ed  
through connection with other like-minded nonprofit organizations and other organizations

by uniting and providing essential resources. Alignment of Love, Inc will attempt to accomplish this by developing  
developing solutions in the areas of education and employment while sharing and living out the gospel of Christ

Our desire is to see lives transformed and create a hope for the future.

The date of each amendment(s) adoption: MARCH 20, 2019, 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 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.

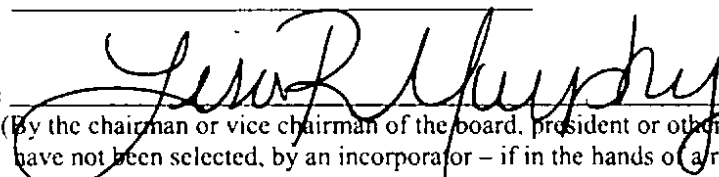
Adoption of Amendment(s) (CHECK ONE)

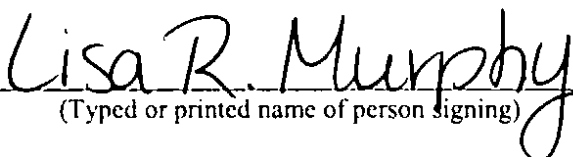
- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)  
was/were sufficient for approval.

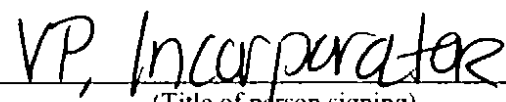
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated JUNE 15, 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)

  
(Typed or printed name of person signing)

  
(Title of person signing)