N1900006093

(Requestor's Name)	
(Address)	10034314
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	04/27/2001032
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	S TALLENT MAY 2 6 2920
Special Instructions to Filing Officer:	
Office Use Only	1



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May 11, 2020

JONATHAN D WILSON THE HOOD MINISTRIES, INC. 1645 ECHO DR TITUSVILLE, FL 32780

SUBJECT: THE HOOD MINISTRIES INC.

Ref. Number: N19000006093

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

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.

Susan Tallent Regulatory Specialist II

Letter Number: 120A00009604

Jonathan Wilson, Esq. 1645 Echo Drive Titusville, FL 32780 W: 407-420-1044

C: 321-698-8674

May 19, 2020

Amendment Section Division of Corporations P.O. Box 6237 Tallahassee, FL 32314

VIA CERTIFIED MAIL 7618 0360 0080 3545 9368

Re:

The Hood Ministries, Inc.

Doc. No.:

N19000006093

Dear Sir/Madam:

I am in receipt of your May 11, 2020 letter (Letter Number 120A00009604), copy enclosed, in the above referenced matter. Enclosed please find the Articles of Amendment for a Florida Not for Profit Corporation. I apologize for the previous error on my part.

Thank you for your assistance in this matter. Should you have any questions, please do not hesitate to call.

Sincerely.

Jonathan Wilson

Enclosures as stated

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() () () Jonathan Wilson, Esq. 1645 Echo Drive Titusville, FL 32780 W: 407-420-1044

C: 321-698-8674

April 16, 2020

Amendment Section Division of Corporations P.O. Box 6237 Tallahassee, FL 32314

VIA CERTIFIED MAIL 7018 0360 0000 35450 9351

Re:

The Hood Ministries, Inc.

Doc. No.:

N19000006093

Dear Sir/Madam:

Enclosed please find the Articles of Amendment in the above referenced matter. I have also enclosed the required filing fee of \$35.00 (check number 4790) made payable to the Florida Department of State.

Thank you for your assistance in this matter. Should you have any questions, please do not hesitate to call.

Sincerely.

jdw

Enclosures as stated

Jonathan Wilson

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: The 1000	Ministries Inc.
DOCUMENT NUMBER: N190000 60°	903
The enclosed Articles of Amendment and fee are submitted	
	•
Please return all correspondence concerning this matter to	-
Jonathan Wilson, President	
/ (Na	me of Contact Person)
	(Firm/ Company)
With Till O	
1645 ECHO Drive	(Address)
	(Addices)
1645 Echo Prive Titusulle, FL 32780	
(Cit	y/ State and Zip Code)
Jonathan w @ Shapiraatlaw, C	future annual report notification)
For further information concerning this matter, please call	:
Jorathan Wilson	at 371-698-8674 (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$-	43.75 Filing Fee & ☐\$52.50 Filing Fee
	ertified Copy Certificate of Status
	Additional copy is Certified Copy nclosed) (Additional Copy is
	Enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

The Hood Ministries Inc.

(Name of Corporation as currently filed with the Florida D	Dept. of State)
N19000006093	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
NA	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	20
	2070 MAY 21
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11/ A-
	9: 32
D. If amending the registered agent and/or registered offic	re address in Florida, enter the name of the
new registered agent and/or the new registered office ac	ddress:
Name of New Registered Agent: V	//4
New Registered Office Address:	(Florida street address)
	, Florida
	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered . I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept the obligations of the position.
.//^	
10 124 Sig	gnature of New Registered Agent, if changing

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.				
	leaves the corpo	ration, Sally Smith is named the V	is listed as the PST and Mike Jones is listed as the V. There is V and S. These should be noted as John Doe, PT as a Change.	
Example: $\frac{X}{X}$ Change $\frac{X}{X}$ Remove $\frac{X}{X}$ Add	<u>V</u> <u>M</u>	hn Doe ike Jones lly Smith		
Type of Action Check One)	<u>Title</u>	<u>Name</u>	Address	
) Change Add Remove				
Change Add Remove		1//A		
Change Add Remove Change		7, 1,1		
Add Remove				
Change Add Remove				
Change Add				
Remove If amending or ac (attach additional s		Articles, enter change(s) here: ry). (Be specific)		
	•	with the following	S	
Jand 0100	11.50110V	15 biganized	ic purposes, the making of	

Code, or collesponding section of any future federal
tax (all.
Replace Dissolution with the following's
Upon dissolution of the organization, assets shall be
distributed for one or more exempt purposes
within the meaning of Section 501(c)(3) of the
Internal Revenue Code, or corresponding section of
ony tutule tax code, or shall be distributed to
the federal government, or to a state or local
a relament for for Nobles Acresse.
government for, for public purpose.
The date of each amendment(s) adoption: $\frac{4/9/2020}{}$, if other than the date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(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.

	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.
Dated	5/19/20
Signatur	re
-	(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)
	Jongthen Wilson
	(Typed or printed name of person signing)
	President
	(Title of person signing)