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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	SALUTE TO THE	BRAVE - HERO PRO	DJECT, INC.	
	N19000007021			
DOCUMENT NUMBER:				
The enclosed Articles of A	mendment and fee are sub	omitted for filing.		
Please return all correspond	dence concerning this mat	ter to the following:		
LINDA THOMPSON				
		(Name of Contact P	erson)	
SALUTE TO THE BRAV	E - HERO PROJECT, INC	C.		
		(Firm/ Company	y)	
5770 ENTERPRISE PKW	Y			
		(Address)	- -	
FORT MYERS, FL 33905	;			
		(City/ State and Zip	Code)	
HEROPORJECTBUILD@	GMAIL.COM			
	E-mail address: (to be use	d for future annual re	ort notification	n)
For further information con	cerning this matter, please	e call:		
LINDA THOMPSON		at	239	896-2640
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	Address	Sto	eat 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

Name of Corporation as currently filed with the Florida	Dept. of State)	
N19000007021		
(Document Num	ber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the followin
A. If amending name, enter the new name of the corpora	<u>tion:</u>	
		The new
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>		
Enter new mailing address, if applicable;		
(Mailing address MAY BE A POST OFFICE BOX)		7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
		70
		SST F
). If amending the registered agent and/or registered off	ica address in Florida	enter the name of the
new registered agent and/or the new registered office		enter the name of the
Name of New Registered Agent:		
.		
New Registered Office Address:	(Fl	orida street address)
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa		the obligations of the position.
	Samuel of Many Basist	pred 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	PT V	John Doe Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet		nal Articles, enter change(s) here: ssary). (Be specific)	
ADMENDMENT TO AR	TICLE I	<u> </u>	
CHANGE TO			
Said organization is organ	ized excl	usively for charitable purposes, including, for suc	ch purposes, the making of distibutions
to organizations that quali	fy as exc	mpt organizations described under Section 501(c)	(3) of the Internal Revenue Code,
or corresponding section of	of any fut	her federal tay code	

Upon the dissolution of the or	ganization, 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 any future federal	
tax code, or shall be distribute	ed to the federal government, or to a state or local government, for a public purpose.	
		
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The date of each amendment date this document was signed		, if other than the
Effective date if applicable:	12/25/2020	
	(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be department of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	

D-4-4	12/29/2020
Dated	
Signatur	e Juda Shanpson
J	(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)
	Linda Thompson

(Title of person signing)