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TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Food Is Kindness,	Inc.			
	N19000009417				
DOCUMENT NUMBER:					_
The enclosed Articles of Am	nendment and fee are subm	nitted for filing.			
Please return all corresponde	ence concerning this matte	er to the following:			
Tamara Azamar					
		(Name of Contact P	erson)		_
Food Is Kindness, Inc.					
		(Firm/ Compan	y)	· · · · · · · · · · · · · · · · · · ·	_
831 W. 49th Street					
		(Address)			_
Hialeah, FL 33012					
		(City/ State and Zip	Code)		_
Foodiskindness@gmail.ca	om				
E	-mail address: (to be used	for future annual re	port notification	n)	_
For further information conc	erning this matter, please	call:			
Tamara Azamar		a	520	250-4535	
-	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)	_
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida	Department of	State:	
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing A	ddress	St	reet Address		

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

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

	of	
Food Is Kindness, Inc.		2020 C 1-9 84 8:21
Name of Corporation as currently filed with the	Florida Dept. of State)	- ,
N19000009417		
(Docum	ent Number of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this Florida N	lot For Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
N/A		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		orated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applical	N/A	
(Principal office address MUST BE A STREET A	DDRESS)	
	 -	
	<u> </u>	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE)	BOX) N/A	
D. If amending the registered agent and/or regis		orida, enter the name of the
new registered agent and/or the new register		
Name of New Registered Agent:	N/A	
Van Braintanad Office Addragen		(Florida street address)
<u>New Registered Office Address</u> :	N/A	
	(City)	, Florida (Zip Code)
	(Спу)	(Elp Code)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	legistered Agent: t. I am familiar with and a	accept the obligations of the position.
	wy/ A	
-	Signature of New 1	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: X.Change X.Remove X.Add	$\frac{\underline{PT}}{\underline{V}}$ \underline{SV}	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	4	Address
l) Change Add		<u>N/A</u>		
Remove			_	
2) Change Add		N/A		
Remove 3) Change Add Remove		N/A		
4) Change Add		N/A		
Remove			_	
5) Change Add		N/A		
Remove				· · · · · · · · · · · · · · · · · · ·
6) Change Add		N/A		
Remove				· · · · · · · · · · · · · · · · · · ·
E. If amending or addin (attach additional shee) SEE NEXT PAGE FOR CHAN-	ts, if nece	onal Articles, enter change(s) here ssary). (Be specific)	:	
OLD NEVE FARE FOR CHAIR	~			
	,			
			· · · · · · · · · · · · · · · · · · ·	
	_			

	specific purpose for which this corporation is organized:
The organization is organized e	xclusively for charitable, religious, educational,
and scientific purposes under s	ection 501(c)(3) of the Internal Revenue Code,
or corresponding sections of an	ny future federal tax code.
Providing relief to the poor. Prov	viding food to the poor.
Additional article	
Articles IX - Dissolution Clause:	
Upon the dissolution of the orga	nization, assets shall be distributed for
one or more exempt purposes v	within the meaning of Section 501(c)(3)
of the Internal Revenue Code, o	r corresponding section of any future federal tax code,
or shall be distributed to the fede	eral government, or to a state or local government for a public purpose.
· <u>-</u>	
	doption:
The date of each amendment(s) as date this document was signed. Effective date if applicable:	doption:
date this document was signed. Effective date if applicable:	(no more than 90 days after amendment file date) sek does not meet the applicable statutory filing requirements, this date will not be listed a

Date	05/05/20 d
Sign	(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)
	Tamara Azamar
	(Typed or printed name of person signing)

(Title of person signing)