## N19000012773

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name)	
,	• •	
(Dx	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
J	. HORNE	,
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FILLI 2022 MAR -3 AMII: 5 SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	THE HELPING HA	ND GROUP INC.		
	N19000012773			
DOCUMENT NUMBER:				
The enclosed Articles of An	nendment and fee are sub-	mitted for filing.		
Please return all corresponde	ence concerning this matt	er to the following:		
Yvon Alexis				
		(Name of Contact P	erson)	
- Warre		(Firm/ Compan	y)	
2937 W BROWARD BLVI	)			
		(Address)	· ·	
FT LAUDERDALE, FL 33.	312			
		(City/ State and Zip	Code)	
Freedup2015				
Е	-mail address: (to be used	for future annual re	port notification	1)
For further information conc	erning this matter, please	call:		
YVON ALEXIS		at	954	2973705
•	(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	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Certifi	) Filing Fee cate of Status ed Copy ional Copy is sed)
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

FILED

2022 MAR -3 PM 12: 00

Name of Corporation as currently filed with the Fl	orida Dept. of State)	O THIE
		_SECRETARY OF SEC TALLAHASSET TO
(Document	Number of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	;	
(Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>x</u> )	
D. If amending the registered agent and/or registere	nd office address in Elevido	
new registered agent and/or the new registered of	office address:	enter the name of the
N f N P i i . i	<del></del>	
Name of New Registered Agent:		
	42	
New Registered Office Address:	(Fia	rida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.		he obligations of the position.
	Signature of New Registe	red 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	$\underline{\mathbf{V}}$	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	VINCENT SINGLETARY	2937 W BROWARD BLVD FT LAUDERDALE, FL 33312
Remove			
2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			<del></del> -
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		nal Articles, enter change(s) here: ssary). (Be specific)	
_			

7		
		·
	·	
		<del></del>
		<u>.</u>
The date of each amendmen date this document was signed	t(s) adoption: FEBRUARY 2, 2022	, if other than the
Effective date <u>if applicable</u> :	FEBRUARY 2, 2022	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	nis block does not meet the applicable statutory filing requirement he Department of State's records.	ts, this date will not be listed as the

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

(CHECK ONE)

Adoption of Amendment(s)

Dated	FEBRUARY 2, 2022
2	il Alana
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)
	YVON ALEXIS
	(Typed or printed name of person signing)

(Title of person signing)