## N2000002238

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

.

NAME OF CORPORATION: Internation	al Helping Overcome Poverty Everywhere Inc.
DOCUMENT NUMBER: N 2000000	2238
The enclosed Articles of Amendment and fee are sub-	
Please return all correspondence concerning this matter	er to the following:
Kimberly Stratton	
TCHT10	(Name of Contact Person)
International H.O.P.E. Inc.	
	(Firm/ Company)
4300 W. Lake Mary Blvd. Sui	te 1010-343
	(Address)
Lake Mary, FL 327146	
9	(City/ State and Zip Code)
helpingovercome poverty @ outlos	K-com
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Kimberly Stratton (Name of Contact Person	at 717 623 4321 (Area Code) (Daytime Telephone Number)
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certificate of Status	
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

International Helping Overcom	Le Poverty Ev	enjuliere Inc		
Name of Corporation as currently filed with the Fl				
N2000002238				
(Document	t Number of Corporati	on (if known)	·	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida</i>	Not For Profit Corpo	eration adopts the fol	lowing
A. If amending name, enter the new name of the co	orporation:			
NA			TH	ie new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "inco	rporated" or the abbre		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	E NA			
			-1	
	<u> </u>		2020	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	NA NA		NOV 23	T) 
			→ 100 A	ָ כי
D. If amending the registered agent and/or register	red office address in l	Florida, enter the nan	ne of the	
new registered agent and/or the new registered				
Name of New Registered Agent:	p A			
New Registered Office Address:		(Florida street addre.		
			, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and	d accept the obligation:	s of the position.	
	NIA		•	
	Signature of Nev	w Registered Agent, if c	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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	CEO .	Kimberly Stratton ited on oig, nat Application.	713 Creekwater Terrace Apt 107 Lake Many, FL 32746
Remove	Nevar II	ited on ong nat Appulation.	
2)ChangeAdd	<del></del>	/	
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add	/		
Remove			
6) Change Add	<del></del>	<del></del>	
Remove			
E. If amending or add (attach additional she		.rticles, enter change(s) here: ). (Be specific)	
NA			
	-		<del></del>

N/A	
<u>,</u>	
The date of each amendment(s) adoption:	n the
Effective date if applicable: 02/24/20. when organization tormed.  (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.	ıe
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 02/14/20 Signature Radia C. Winder	
(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)	
Kinberly Strath (CEO) Nadia O. Winder  (Typed or printed name of person signing)	
(Typed or printed/name of person signing)	
,	
CEO / COTB	
(Title of person signing)	