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12/9/20



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	nds Community Outread	h			
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee	are submitted for filing.				
Please return all correspondence concerning the	nis matter to the following	ıg:			
Verlynn J. Horne					
	(Name of Conta	ct Person)		_ ,- 	
Platinum Hands Community Outreach					
	(Firm/ Com	pany)	 -		
9100 Conroy Windermere Rd, Ste 200					
	(Addres	s)			
Windermere, FL 34786					
	(City/ State and	Zip Code)			
E-mail address: (to	be used for future annua	il report no	tification	3)	
For further information concerning this matter	, please call:				
Verylnn Horne		407 at		274-8822	
(Name of Contact	Person)		Code)	(Daytime Telephone Number	1)
Enclosed is a check for the following amount	made payable to the Flo	ida Depart	tment of	State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Fee & \$\Bigsiz\$ \$\\$43.75 \text{ Filing}\$ Certified Cop (Additional coenclosed)	y	Certifi Certifi	Difiling Fee cate of Status ed Copy cional Copy is sed)	
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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

FILED

Platinum Hands Community Outreach 100

2020 OCT 27 PM 3: 05

(Name of Corporation as currently filed with the Florida Dept. of State) N20000007645 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			W
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	
Amendment III is change	d to refle	et:	
Said organization is org	zanized e	xclusively for charitable, religious, educational and sci	entific purposes, including, for such
purposes, the making of d	listrubitio	ns to organizations that qualify as exempt organization	ns described under Section
501(c)(3) of the Internal I	Revenue (Code, or corresponding section of any future federal ta	x code.
Upon the dissolution of	the orga	nization, assets shall be distrubuted for one or more ex	tempt purposes within the meaning

distributed to the federal government, or to a state or local government, for a public purpose	se. Any such assets not disposed of
shall be disposed of by a court of competent jurisdiction in the county in which the princip	al office of the organization is then
ocated, exclusively for such purposes or to such organization or organizations, as said Co	urt shall determine, which are
organized and operated exclusively for such purposes.	
	-
· · · · · · · · · · · · · · · · · · ·	-
The date of each amendment(s) adoption: 10/5/2020 late this document was signed.	, if other than t
Effective date if applicable:	
(no more than 90 days after amendment file date	2)

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

was/were sufficient for approval.

	10/7/2020
Dated .	<u> </u>
Signature	Valy & Henry
	(By the 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)
	Verlynn J. Horne
	Verlynn J. Horne (Typed or printed name of person signing)