N20000010502

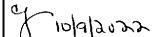
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee. FL 32314

NAME OF CORPORATION: Voices of H	ope Project Inc	·	
N20000010502 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee	are submitted for filing.		
Please return all correspondence concerning t	his matter to the following	ng:	
Ruth Kuttler			
	(Name of Conta	ect Person)	
Voices of Hope Project Inc			
	(Firm/ Com	npany)	
7819 Bucks Run Dr.			
	(Addres	ss)	
Naples, FL 34120			
	(City/ State and	Zip Code)	
info@voicesofhopeproject.org			
E-mail address: (to	be used for future annua	al report notification	on)
For further information concerning this matter	r. please call:		
Ruth Kuttler		239 at	293-7695
(Name of Contac	t Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount	made payable to the Flor	rida Department o	f State:
☐ \$35 Filing Fee ☐\$43.75 Filing Certificate of		y Certi opy is Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Sec Division of Corr The Centre of	oorations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Voices of Hope Project Inc

(Name of Corporation as currently filed with the	e Florida	Dept. of State)	2622 3111 7	<u> </u>
N20000010502				
(Docum	nent Num	ber of Corporation (if known)	l	: _
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statı	ites, this Florida Not For Profit	Corporation adopts t	he following
A. If amending name, enter the new name of the	e corpor	ation:		
name must be distinguishable and contain the word		ation" or "incorporated" or the	abbreviation "Corp.	The new " or "Inc."
"Company" or "Co." may not be used in the name	<u>e</u> .			
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>		∑) 7819 Bucks Run Dr	· · · · · · · · · · · · · · · · · · ·	
		Naples, FL 34120		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)	7819 Bucks Run Dr		_
· · · · · · · · · · · · · · · · · · ·		Naples, FL 34120		
D. If amending the registered agent and/or registerew registered agent and/or the new register			ne name of the	
Name of New Registered Agent:	NA			
trance of their registered rigen.	NA			
New Registered Office Address:		(Florida stree	et address)	
	NA		. Florida NA	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen			gations of the position	1 .
_		Signature of New Registered Age	ent, 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	PT John Do V Mike Jo SV Sally Si	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>P</u>	Ruth Kuttler	7819 Bucks Run Dr Naples, FL 34120
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Arti	icles, enter change(s) here: (Be specific)	
		-	

		
		
		· · · · · · · ·
		
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	
	es not meet the applicable statutory filing requirements, this date will not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

ত্র	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 $\frac{7/2/22}{}$
	Signature Ruth Kuttle
	(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)
	RUTH KUTTLER
	(Typed or printed name of person signing)
	President
	(Title of person signing)