N21000003799

(Requesto	or's Name)
(Address)	
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documer	nt Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	AN HUNTS FOR HEROES, INC.
N21000003799 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
LAVERNE STEPHENS	
-	(Name of Contact Person)
MULTI-DIMENSIONS INVESTMENTS, INC.	
	(Firm/ Company)
2114 N FLAMINGO ROAD SUITE #201	
	(Address)
PEMBROKE PINES, FLORIDA 33028	
	(City/ State and Zip Code)
LAVSTEP2@AOL.COM	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
LAVERNE STEPHENS	404 274-2899 at
(Name of Contact Pe	
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of Sta	
Mailing Address	Street Address

Amendment Section Division of Corporations P.O. Box 6327 Taliahassee, 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

ALL AMERICAN HUNTS FOR HEROES, INC.

(Name of Corporation as currently filed with the Florida	Dept, of State)	
N21000003799		
(Document Num	nber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statuamendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Profit Corpora</i>	tion adopts the following
A. If amending name, enter the new name of the corpora	ation:	
N/A		The new
name must be distinguishable and contain the word "corpor" (Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbrevio	ution "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES.	(2	
		
		2021 1633
C. Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		ယ်
		2
D. If amending the registered agent and/or registered of	fice address in Florida, enter the name	of the 2
new registered agent and/or the new registered office		
Name of New Registered Agent: N/A		
	-	
	(Florida street address)	
New Registered Office Address:		
	, F	lorida
		(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	d Agent: amiliar with and accept the obligations o	f the position.
	Signature of New Registered Agent, if cha	nging

If amonding 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= Trustec; 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 Doe 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 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	
ADD ARTICLE IX - AR	TICLES (OF DISSOLUTION	
Upon the dissolution of the	nis organi	zation, assets shall be distributed for one or more	exempt purposes within the meaning
of Section 501 (c) (3) of t	he Interna	al Revenue Code or corresponding section of any	future federal tax code, or shall be
distributed to the federal a	govern <u>ne</u>	nt, for a public purpose.	

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		<u>-</u>				
						
	4.	/25/2021				
The date of each amendmen	t(s) adoption: <u>"</u>					if other than the
date this document was signed	i.					
L'éfactive date if applicable	4/27/2021					
Effective date <u>if applicable</u> :	(110	more than 90 day.	e after amond	ment file date)		
	(1417)	mar man 20 day.	, ujier amenar	nem jne dane,		
Note: If the date inserted in the document's effective date on t			ible statutory (filing requirem	ents, this date w	ill not be listed as the
Adoption of Amendment(s)	(<u>C</u> I	HECK ONE)				
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by toproval.	he members and	the number of	votes cast for	the amendment(s)

15	4/27/2021
Dated 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)
	GARY L. BRICE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)