Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H230002712393)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CHISHOLM LAW FIRM, PLLC

Account Number : 120220000066 Phone : (407)674-2657 Fax Number : (888)545-5919

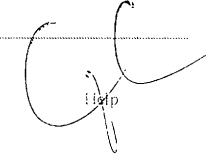
**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

constant = conAGAPE SHELTERS & HOMES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$35.00

Electronic Filing Menu — Corporate Filing Menu



 \odot

P.O. Box 6327

Tallahassee, FL 32314

COVER LETTER

TO: Amendment Section Division of Corporations

AGAPE SHELTERS & HOMES, INC.

NAME OF CORPORATION:					
N21000004478					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee :	ire submitted for fil	ling			
Please return all correspondence concerning th Breanna McCarthy	is matter to the foll	owing.			
	(Name of C	Iontact Person)		
Chisholm Law Firm, PLLC					
					۶۰۵
	(Firm/	Company)			
37 N Orange Ave , Suite 500					•
	1.32	ddress)			- 1
Orlando, Florida 32801	(216	acti Css j			:
	(City/ State	and Zip Code)		<u> </u>
E-mail address. (to	be used for future a	nnual report n	otification	n)	
For further information concerning this matter.	please call.				
Breanna McCarthy	•			674-2657	
(Name of Contact	Person)	ut(Are	a Code)	(Daytime Telepho	ne Number)
Enclosed is a check for the following amount r	nade payable to the	Florida Depa	rtment of	State	
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of \$	Status Certified	Copy al copy is	Certif Certif	D Filing Fee leate of Status led Copy lional Copy is lised)	
Mailing Address		Street /			
Amendment Section Division of Corporations			nent Secti n of Corpe		
Ou professional and a configurations		DIVISION	i or = min	и англио	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

AGAPE SHELTERS & HOMES, INC.

(Name of Corporation as currently filed with the Flo N21000004478	orida Dept. of State)	
	Number of Corporat	ion (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation.	•	•	ion adopts the following
A. If amending name, enter the new name of the cor THE COMPASSION COMMUNITY CONNECTOR A	LLIANCE, Inc		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "inco	rporated" or the abbrevia	tion "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 BOX	<u>-</u>		
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		Florida, enter the name o	of the
Name of New Registered Agent:			
New Registered Office Address		(Florida street address)	
	(Cny)	FI	onda Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	stered Agent: am familiar with an	d accept the obligations of	the position.
	Signature of Ne	w Registered Agent, 15 char	nging

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 = Charman 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>	<u>John Doe</u> <u>Mike Jones</u> <u>Saily Smith</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addı</u>	<u>es</u> s
1)Change Add				
Remove				
2) Change Add			<u> </u>	
Remove 3) Remove Add Remove				
4) Change Add				
Remove				
5) Change Add				
Remove				
6)ChangeAdd				
Remove				
E. If amending or addir (attach additional shee		nal Articles, enter change(s) here sary).— (Be specific)		

		· · · · · · · · · · · · · · · · · · ·
		
		
		.
		
		
		
		
		
		· ·
-		<u></u>
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	lopted by the members and the number of votes east for the amendment(s)	

adopted by the board of directors

ف

Al	ug 3, 2023
re L	Bell
(By ha	the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	Danielle Gaskins
	(Typed or printed name of person signing)
	President

There are no members or members entitled to vote on the amendment(s). The amendment(s) was were