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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
		

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Tammi Clina

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Heaven at Ha	and, Inc.			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning th	nis matter to the following	g:		
Jared O. Hodge				
	(Name of Conta	ct Person)		
ChurchShield Compliance Services. LLC				
	(Firm/ Com	pany)	· · · · ·	
15215 Endeavor Drive				.: :
	(Addres	s)		S. 1-2
Noblesville, IN 46060				OP4 SEP -
	(City/ State and	Zip Code)		AS.
jared@churchshield.com				SEE S
E-mail address: (to	be used for future annua	report notifica	ition)	59
For further information concerning this matter	, please call:			
Jared O. Hodge		317 at	900-7024	
(Name of Contact	Person)	(Area Cod	e) (Daytime Telep	ohone Number)
Enclosed is a check for the following amount i	made payable to the Flor	ida Department	of State:	
■ \$35 Filing Fee □\$43.75 Filing I Certificate of S		y Ce ppy is Ce (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is aclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment S Division of Co The Centre of	ection	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

Articles of Amendment to Articles of Incorporation of

ida Dept. of State)			
umber of Corporation (if	known)		
tatutes, this Florida Not I	For Profit Corporation add	pts the foll	lowing
oration:			
		Th	ie new
	ed" or the abbreviation "C	Corp." or "	Inc."
ESS)			
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		Ther.	<u> </u>
office address in Florid	a, enter the name of the	TI.	59
(Florida street address)		
	, Florida		
(City)	(Zip Co	ide)	
ered Agent: m familiar with and accep	ot the obligations of the po	sition.	
Signature of New Regi	stered Agent, if changing		
	umber of Corporation (if satutes, this Florida Not I oration: poration" or "incorporate office address in Florid ice address: (City) ered Agent: m familiar with and accept	umber of Corporation (if known) catutes, this Florida Not For Profit Corporation add oration: coration or "incorporated" or the abbreviation "Coration or "incorporated" or the abbreviation "Coration" or "incorporated" or "i	umber of Corporation (if known) attutes, this Florida Not For Profit Corporation adopts the following or the State of the

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 Do Mike Jo Sally St	<u>ones</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address	
1) Change Add		_			
Remove				2024 SET	
2) Change Add		_		725	44
Remove 3) Change Add Remove		-			T
4) Change Add		-			
Remove					
5) Change Add		_			
Remove					
6) Change Add		_			
Remove					
E. <u>If amending or addin</u> (attach additional shee	g addition ts, if nece	onal Arti essary).	cles, enter change(s) here: (Be specific)		

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		2024
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		_9
The date of each amendment(s) adopti- date this document was signed.	on:	, if other than th
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	: listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

adopted by the board	of directors.
Dated _	8-14-24
Signature _	
h:	y the chairman or vice chairman of the board, president or other officer-if directors are not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	David M. Solar
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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

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