N22000007430

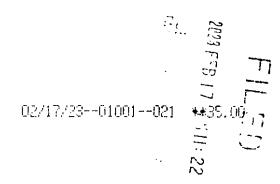
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Sineral Instructions to Filing Officer:
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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or 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>v</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change _X Add	P	Sophia L. Crittenden	704 Monty Circle Panama City, Fl 32405
Remove 2) Change Add	D	Duriel D. Crittenden	704 Monty Circle Panama City, Fl 32405
Remove 3) Remove			
4) Change Add	··		, \tilde{\tiilie{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tiilde{\tilde{\ti
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addi (attach additional she	ng addition ets, if neces	nal Articles, enter change(s) here: ssary). (Be specific)	
Article IX: Upon the dis	solution of	the corporation, assets shall be distributed for o	one or more exempt purposes within the me
		my future federal tax code, or shall be distribute	
		sed of shall be disposed of by a court of compet	
•		is then located, exclusively for such purposes of the are organized and operated exclusively for su	
as said Court shan deter	man, waitl	a are organized and operated exclusively lot su	en parposes.

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Hands Project, INI	<u> </u>	
DOCUMENT NUMBER: N22000007430			
The enclosed Articles of Amendment and fed	e are submitted for filing		
Please return all correspondence concerning	this matter to the following	ing:	
Duriel D. Crittenden			
	(Name of Cont	act Person)	
The United Hands Project			
· -	(Firm/ Cor	прапу)	
2310 HWY 77, STE 110-309			
	(Addre	ess)	
LYNN HAVEN, FL 32444			
	(City/ State and	i Zip Code)	
services@theunitedhp.org			
E-mail address: (t	o be used for future annu	ial report notification	n)
For further information concerning this matter	er, please call:		
Duriel Crittenden		850 at	960-9990
(Name of Contact	et Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoun	t made payable to the Flo	orida Department of	State:
S35 Filing Fee S43.75 Filing Certificate of	f Status S43.75 Filing f Status Certified Co (Additional c enclosed)	py Certil copy is Certil (Addi	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section		Street Address Amendment Sect	ion
Division of Corporations P.O. Box 6327		Division of Corp	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

The United Hands Project

(Name of Corporation as currently filed with the F)	lorida Dept. of State)	
N22000007430		
(Document	t Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not	For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
	. 17 46	The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation or incorpora	tea or the appreviation Corp. or inc.
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
		•
C. Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
		
D. If amending the registered agent and/or register new registered agent and/or the new registered.		a, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		, Florida
	(Ciny)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		pt the obligations of the position.
	Signature of New Reg.	istered Agent, if changing

The organization to receive the ass	ets of the corporation hereunder shall be selected in the discretion of a majority
of the managing Board of Director	s y of the corporation, and if it its members cannot so agree, then the recipient organization
shall be selected pursuant to a verif	ned petition in equity filed in a court of proper jurisdiction against the corporation
by one (1) or more of its managing	Board of Directors y which verified petition shall contain such statements as reasonably
or indicate the applicability of this	section. The court upon a finding that this section is applicable shall select the qualifying
organization or organizations to rec	reive the assets to be distributed, giving preference if practicable to organizations
located within the State of Florida.	
In the event that the court shall find	I that this section is applicable but that there is no qualifying organization to it which
has a charitable purpose, which, at	least generally, includes a purpose similar to the corporation, then the court shall direct
the distribution of its assets lawfull	y available for distribution to the Treasurer of the state of Florida to be added to the
state of Florida to be added to the g	eneral fund.
The date of each amendment(s) a date this document was signed.	doption:, if other than t
Effective date <u>if applicable</u> :	(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 blo document's effective date on the Do	ock does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes east for the amendment(s) al.

Dated
Signature Laputo Cath
(By the chairman or vice chairman of the board, president or other officer-if directed have not been selected, by an incorporator – if in the hands of a receiver, trustee, cother court appointed fiduciary by that fiduciary)
Sophia L. Crittenden
(Typed or printed name of person signing)

(Title of person signing)