

N22000014210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

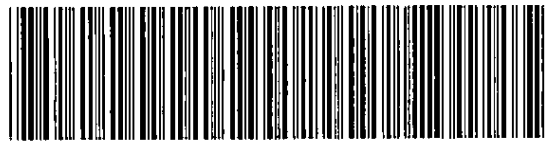
(Business Entity Name)

(Document Number)

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11/20/23--0101--002 **10.00

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TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 28, 2023

DEWAYNE KIMBLE SR.
235 APOLLO BEACH BLVD. #146
APOLLO BEACH, FL 33572

SUBJECT: THE HATTIE MAE KIMBLE FOUNDATION CORPORATION
Ref. Number: N22000014210

We have received your document for THE HATTIE MAE KIMBLE FOUNDATION CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, **along** with a copy of this letter, within 60 days or your filing will be considered **abandoned**.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shaunteria Cobbs
Regulatory Specialist II

Letter Number: 523A00014593

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TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Hattie Mae Kimble Foundation Corporation

DOCUMENT NUMBER: N22000014210

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dewayne Kimble

(Name of Contact Person)

The Hattie Mae Kimble Foundation

(Firm/ Company)

235 Apollo Beach Blvd. 146

(Address)

Apollo Beach, FL 33572

(City/ State and Zip Code)

nunimanager@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dewayne Kimble

813

245-7228

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

810

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

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FLORIDA DEPARTMENT OF STATE

Articles of Amendment
to
Articles of Incorporation
of

The Hattie Mae Kimble Foundation Corporation

(Name of Corporation as currently filed with the Florida Dept. of State)

N22000014210

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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Registered Agent change to 235 Apollo Beach Blvd. 146, Apollo Beach, FL 33572 instead of 6924 Creastpoint Drive,

Apollo Beach, FL 33572

Article VII for P, M, M (Dewayne Kimble, Jennifer Silva, and Dewayne Kimble II

the address should be changed to 235 Apollo Beach Blvd. 146, Apollo Beach, FL 33572 instead of

6924 Creastpoint Drive, Apollo Beach, FL 33572

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The date of each amendment(s) adoption: December 22, 2022, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

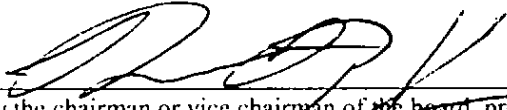
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

- ☐ 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 11-7-22

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)

Dewayne A Kimble
(Typed or printed name of person signing)

President
(Title of person signing)

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SECRETARY OF STATE
TALLAHASSEE, FL