N22000014210

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(City/State/Zip/Phone #)
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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

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

Dividion of Corporation.					
The Hatt	te Mae Kimble Foundation Co	orporation			
N220000142	10				
The enclosed Articles of Amendment and	fee are submitted for filing.				
Please return all correspondence concerni	ng this matter to the following	::			
Dewayne Kimble					
	(Name of Contac	t Person)		-	
The Hattie Mae Kimble Foundation					
	(Firm/ Comp	any)			
235 Apollo Beach Blvd. 146					
	(Address)	•		
Apollo Beach, FL 33572					
	(City/ State and 2	lip Code)			
nunimanage@gmail.com					
E-mail address	: (to be used for future annual	report notificati	on)		
For further information concerning this m	atter, please call:				
Dewayne Kimble		813	245-7228		
(Name of Cor	ntact Person)	(Area Code)	(Daytime Tele		
Enclosed is a check for the following amo	unt made payable to the Flori	da Department o	f State:	_	7 023 1
■ \$35 Filing Fee □S43.75 Fil ¶10 Certificate	ing Fee & S43.75 Filing Fe of Status Certified Copy (Additional cop	Cert	50 Filing Fee ificate of Status ified Copy	MALI ABAS	11 AUR

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

(Additional Copy is Enclosed)

Articles of Amendment to Articles of Incorporation of

The Hattie Mae Kimble Foundation Corporation

(Name of Corporation as currently filed with the F	lorida Dept. of State)	
N22000014210		
(Documen	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	e following
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADI</u>	DRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<i>DX</i>)	
		_
D. If amending the registered agent and/or register		
new registered agent and/or the new registered	office address:	
Name of New Registered Agent:		
Variable of CAS and Advanced	(Florida street address)	~
<u>New Registered Office Address:</u>		023 NOV 14 PM
	(City) Florida [7]	_ S
	(Chy) (Zip Coup):	
New Registered Agent's Signature, if changing Reg		
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the postਸ਼ੀਨਸ਼, ਸਾਹ, ਸਾੜ੍ਹ	ب ب پ
	Signature of New Registered Agent, if changing	
	ыднивие од тем кедыстви пуви, у спинуту	

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	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change Add	M	Jennifer Silva	235 Apollo Beach Blvd. 146 Apollo Beach, FL 33572	
Remove			.	
2) X Change Add	<u>M</u>	Dewayne Kimble II	235 Apollo Beach Blvd. 146 Apollo Beach, FL 33572	
Remove 3) X Change Add Remove	<u>P</u>	Dewayne Kimble	235 Apollo Beach Blvd. 146 Apollo Beach, FL 33572	
4) Change Add			2022	
Remove 5) Change Add			ZOZNOVIJE PI	
Remove 6) Change Add				
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
The following information	n needs to be ame	nded on the orgnianl "Electronic Articles of I	Incorporation".	
Principal address change	to 235 Apollo Bea	ach Blvd, 146, Apollo Beach, FL 33572 inste	ad of 6924 Creastpoint Drive,	
Apollo Beach, FI. 33572				
Mailing address change to 235 Apollo Beach Blvd. 146, Apollo Beach, FL 33572 instead of 6924 Creastpoint Drive,				
Apollo Reach, El. 33572				

Registered Agent change to 235 Apollo Beach Blv	d. 146, Apollo Beach, FL 33572	2 instead of 6924 Creast	point Drive,	
Apollo Beach, FL 33572			·	
Article VII for P, M, M (Dewayne Kimble, Jennife	er Silva, and Dewayne Kimble I	Ī		
the address should be changed to 235 Apollo Beac		· ·		
6924 Creastpoint Drive, Apollo Beach, FL 33572	, , ,			
6924 Creasipoint Drive, Apono Beach, 1 E 33372				
				
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The date of each amendment(s) adoption: date this document was signed.	December	22,202	, if other t	than the
Effective date if applicable:	e than 90 days after amendment	file date)		
Note: If the date inserted in this block does not me document's effective date on the Department of Sta		g requirements, this date	will not be listed as	the
Adoption of Amendment(s) (CHEC	CK 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 director have not been selected, by an incorporator – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)			
	(Typed or printed name of person signing)		
	fresiden		
	(Title of person signing)		

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