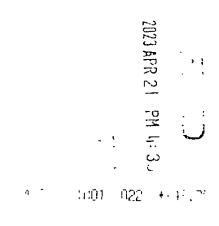
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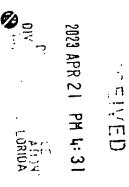
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Special Instructions to f	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Living Hope, Inc.			
DOCUMENT NUMBER:	N230000	01242		
The enclosed Articles of Amend	dment and fee are sub-	mitted for filing.		
-		•		
Please return all correspondence	e concerning this matt	er to the following:		
Natalie Moore				
		(Name of Contact Pe	rson)	
Living Hope, Inc				
		(Firm/ Company	·)	
1162 NW Old Mill Drive				
		(Address)		
Lake City, FL				
		(City/ State and Zip G	Code)	
nataliemoorelmhc@gmailcom				
Е-пи	ail address: (to be used	for future annual rep	ort notification)
For further information concern	ing this matter, please	call:		
Natalie Moore		at	386	5907662
(Na	rme of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	owing amount made pa	ayable to the Florida I	Department of	State:
□ \$35 Filing Fee ■	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Add			eet Address	
Amendment S			endment Secti	
Division of C	orporations	Div	ision of Corpo	rations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flo	rida Dept. of State)	JAPK ZI PM 4:3!
Living Hope, Inc.		•
(Document)	Number of Corporation (if known)	7 · · · / i.
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For Profit C</i>	orporation adopts the following
A. If amending name, enter the new name of the corr	poration:	
		The new
name must be distinguishable and contain the word "col "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the a	bbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	PESS)	
(1 Timelpus Diffee ununess MOOT DE A STREET ADDR	. <u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))	
		
D. If amending the registered agent and/or registered		name of the
new registered agent and/or the new registered of	fice address:	
Name of New Registered Agent:	 	
New Registered Office Address:	(Florida street a	uddress)
ivew negisiereu Office Auuress.		
		, Flo r ida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent:	
I hereby accept the appointment as registered agent. I d	im familiar with and accept the obliga	tions of the position.
	Ciamatan Allan Davidson I	. :6.1
	Signature of New Registered Agent	u changing

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	ones .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) x Change Add	<u>P</u>	NATALIE MOORE	
Remove			
2) × Change Add	<u>VP</u>	ERICA MORENO	
Remove 3) × Change × Add Remove	<u>T</u>	GERRI OOSTERHOUDT	
4) × Change × Add	<u>s</u>	BARBARA ETTER	
Remove			
5) Change Add	<u></u>		
Remove			
6) Change Add			
Remove			<u> </u>
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

The date of each amendment(s) adoption: 4-20-23 , if other than the
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 $\frac{4/z//z3}{}$
Signature Mun Mun 4/21/23
(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)
NATALIE MOORE
(Typed or printed name of person signing)
INCORPORATOR AND PRESIDENT

(Title of person signing)