N23 00000 8726

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000413816580

08/14/23--01044--001 **35.00

PROPRIES IN AN 8: 23

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: PROJECT W	ORLD OF JOY ANI	D CARING, INC.	
DOCUMENT NUMBER:	N23000008726			
The enclosed Articles of An	nendment and fee are sub	omitted for filing.		
Please return all correspond	ence concerning this mat	ter to the following:		
SAMPLE, GU	IBRIEL			
		(Name of Contact Perso	on)	
PROJECT WORLD	OF JOY AND CARI	NG, INC.		
		(Firm Company)		
4231 McDaniel Dri	ve			
		(Address)		
Jacksonville, Florid	ia 322089			
		(City/ State and Zip Co	de)	
				ECK TO SECTION OF THE
	E-mail address: (to be use	d for future annual repor	notification)	
For further information con-	cerning this matter, please	e call:		
Jacqueline Poole		at	912-210-2811	
	(Name of Contact Person	n) (A	area Code) (Daytime Tel	ephone Number]:
Enclosed is a check for the	following amount made p	ayable to the Florida Dep	partment of State:	<u>, </u>
X \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing /	Address	Stree	<u> Address</u>	

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

PROJECT WORLD OF JOY AND CARING, INC.

Name of Corporation as currently filed with the Flo	orida Dept. of State	1		
N23000008726				
(Document	Number of Corpora	tion (if known)		
Pursuant to the provisions of section 617,1006, Florida imendment(s) to its Articles of Incorporation:	Statutes, this Florid	a Not For Profit	Corporation adopts the	e following
A. If amending name, enter the new name of the con	rporation:			
NA				The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "ince	orporated" or the	abbreviation "Corp."	
B. Enter new principal office address, if applicable:		NA		
Principal office address MUST BE A STREET ADD				
				_
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BON	<u> </u>			
-	_			
	-			_
D. If amending the registered agent and/or registers	ed office address in	Florida enter th	ie name of the	
new registered agent and/or the new registered of				
Name of New Registered Agent:		NA		
				1
-		(Florida stree	t address)	7: 27
New Registered Office Address:				
		NA	, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Regi	stand trants			7
hereby accept the appointment as registered agent—l	am familiar with an	d accept the oblig	gations of the position.	FATE
	Signature of Ne	w Registered Age	nt, if 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 V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i)ChangeAdd		NA	
Remove			
2) Change Add		.	
Remove 3) Remove Add Remove			
41 Change Add			
Remove			
5) Change Add		<u> </u>	
Remove			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
6) Change Add			7023 AUS 14
Remove			
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Adding to Article III - Please see attached sheet			AH 8: Z4
Addi	ng to Ar	ncie III - Please see attached sheet	
	_		
<u> </u>	 -	-	

·····Addi	ng to Article III - Please see attached sheet.	
		· · · · · · · · · · · · · · · · · · ·
-		
		
-		
		
		, ~
		10 ESB2
		M1 8: 24
		9 (S) A (S
The date of each amendment(s) addate this document was signed.	Ioption: August 10, 2023	if other than the
Effective date <u>if applicable</u> :	August 10, 2023	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	

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

	bers or members entitled to vote on the amendment(s). The amendment(s) was were aid of directors.
Dated	August 10, 2023
	" <u></u>
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)
	GUIBRIEL SAMPLE
	(Typed or printed name of person signing)
	President
	(Title of person signing)

2023 AUG 14 AH 8: 24

Project World of Joy and Caring, Inc. is organized exclusively for charitable purposes, including:

Personal Support

And, Disability Support distributions to organizations that qualify as exempt organization s under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

Any such assets not disposed of shall be disposed of by a court of competent jurisdiction in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.

This is a charitable organization and will operate under the non- profit provisions of the State of Florida