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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

The NAME OF CORPORATION:	Moon of Hope				
N240000 DOCUMENT NUMBER:	07573				
The enclosed Articles of Amendment	and fee are sub	mitted for filing.			
Please return all correspondence conc	erning this matte	er to the following:			
Dina Philosca					
		(Name of Contact Pe	rson)		•
THE MOON O	f 40P.	ć			
		(Firm/ Company)		
2080 Greenview Shores Blvd apt 412					
		(Address)			
Wellington FL 33414					
		(City/ State and Zip (Code)		
dphilosca@moonofhope.org					
E-mail add	ress: (to be used	for future annual rep	ort notification	1)	
For further information concerning th	is matter, please	call:			
Dina Philosca		at	719		
(Name of	Contact Person		(Area Code)	(Daytime Telephone Number))
Enclosed is a check for the following	amount made pa	ayable to the Florida [Department of	State:	
☐ \$35 Filing Fee ■\$43.7; Certif	5 Filing Fee & Teate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certif Certif	D Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section	-		eet Address lendment Sect	ion	
Amendment Section Division of Corpora			ienament Sect vision of Corpo		
P.O. Box 6327			e Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

Moon of Hope CORP				
(Name of Corporation as currently filed with the	e Florida De	ept. of State)		
N24000007573				
(Docum	nent Number	of Corporation	(if known)	
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida No</i>	ot For Profit Corporatio	on adopts the following
A. If amending name, enter the new name of the	e corporatio	<u>on:</u>		
The Moon of Hope, Inc.				The new
name must he distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorpoi	rated" or the abbreviati	
B. Enter new principal office address, if applica	ıble:	2701 President E	Barack Obama Hwy Uni	it C
(Principal office address MUST BE A STREET ADDRESS		Riviera Beach, F	lorida 33407	
	-	-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)	2701 President E	Barack Obama Hwy Un	it C
	I -	Riviera Beach, F	lorida 33407	
D. If amending the registered agent and/or registered agent and/or the new register			rida, enter the name of	f the
Name of New Registered Agent:	Dina Philos			
	2701 Presid	lent Barack Obar	ma Hwy Unit C	
			(Florida street address)	
New Registered Office Address:	Riviera Bea	ach	. Flo	33407 orida
		(City)		Zip Code)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen			ecept the obligations of t	the position.
	-	PK		
_	Sig	nature of New Ro	egistered Agent, if chan	ging

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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	CEO, C	Dina Philosca	2080 Greenview Shores Blvd apt 41 Wellington Fl 33414
Remove 2) Change Add	<u>s</u>	Tyler Newman	135 Exchange Circle apt 203 AshevilleNC 28806
Remove 3) Remove Add x Remove	VP	Jessenia Marrero	West Palm Beach FL 33409
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or additional she		ticles, enter change(s) here: (Be specific)	

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		<u> </u>			···
					
					
					
		.			
					
	 -			- ·-	
			- -		
The date of each amendment(s) adoption date this document was signed.	on:	<u> </u>			. if other than the
Effective date if applicable:					
	(no more than 90 day	vs after amendment	file date)		

<u>Note:</u> 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.

	7/9/2024
Dalgd	
Signature	Oll.
	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, or other court appointed fiduciary by that fiduciary)
	Dina Philosca
	(Typed or printed name of person signing)
	Ch-i
	Chairman (Title of person signing)

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

The Moon of Hope NAME OF CORPORATION:			
N24000007573 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	l for filing.	<u> </u>	
Please return all correspondence concerning this matter to t	he following:		
Dina Philosca			
(Nan	ne of Contact Pe	rson)	
THE MOON of HERE			
	(Firm/ Company)	
2080 Greenview Shores Blvd apt 412			
	(Address)	 	
Wellington FL 33414			
(City	/ State and Zip C	Code)	
dphilosca@moonofhope.org			
E-mail address: (to be used for f	uture annual rep	ort notification	
For further information concerning this matter, please call:			
Dina Philosca	at	719	400-3710
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida D	Department of S	State:
(A	3.75 Filing Fee & rtified Copy dditional copy is iclosed)	Certific Certific	Filing Fee cate of Status ed Copy onal Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Am Div	eet Address endment Section ision of Corport Centre of Ta	rations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Moon of Hope CORP			
(Name of Corporation as currently filed with the	Florida I	Dept. of State)	
N24000007573			
(Docum	nent Numb	er of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statute	es, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporat	ion:	
The Moon of Hope, Inc.			Th
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ble:	2701 President Barack	Obama Hwy Unit C
(Principal office address MUST BE A STREET A		Riviera Beach, Florida	33407
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	2701 President Barack	Obama Hwy Unit C
		Riviera Beach, Florida	33407
D. If amending the registered agent and/or registered agent and/or the new register	stered office	e address in Florida, e	nter the name of the
	Dina Phile		
Name of New Registered Agent:			
	2701 Pres	ident Barack Obama Hw	<u> </u>
New Registered Office Address:		(Flori	ida street address)
	Riviera Be	each	, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	<mark>Registered</mark> t. I am far	Agent: niliar with and accept th	e obligations of the position.
_	<u> </u>	THE RESERVE OF THE PARTY OF THE	adddischausin
	Si	gnature of New Register	ea Agent, 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.

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Example: X Change X Remove X Add	PT John Do V Mike Je SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Change X Add	CEO, C	Dina Philosca	2080 Greenview Shores Blvd apt 41 Wellington Fl 33414
Remove			
2) Change Add	<u>S</u>	Tyler Newman	135 Exchange Circle apt 203 AshevilleNC 28806
Remove 3) Remove Add x Remove	<u>VP</u>	Jessenia Marrero	3161 Village Blvd apt 103 West Palm Beach FL 33409
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	
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		_		
				
				
				
				
The date of each amendment(s) adoptio date this document was signed.	n:			if other than the
Effective date if applicable:	(no more than 90 days			
	(no more than 90 days	after amendment f	île date)	
<u>Note:</u> If the date inserted in this block document's effective date on the Department	es not meet the application of State's records.	ble statutory filing	requirements, this date wi	Il not be listed as the

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.

he no members or members entitled to vote on the amendment(s). The amendment(s) was/were the board of directors.
7/9/2024 Fired
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)
Dina Philosca
(Typed or printed name of person signing)
Chairman
(Title of person signing)