

N25199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

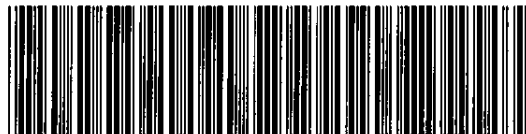
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC -4 AM 9:59

FILED

Amend & N/C

TB

DEC - 7 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Operation Restoration, Inc.

DOCUMENT NUMBER: N25199

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

Please return all correspondence concerning this matter to the following:

Sheila D. Acevedo
(Name of Contact Person)

Friends of Operation Restoration, Inc.
(Firm/ Company)

3205 Gardens E. Drive, Unit A
(Address)

Palm Beach Gardens, FL 33410
(City/ State and Zip Code)

SDAcevedo@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sheila D. Acevedo at (561) 308-5349 (C) 625-4102 (H)
(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

☐ \$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
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Teresa Brown
Regulatory Specialist II
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Letter Number 709A00036402
Ref. Number N25199

Monday, November 30, 2009

Dear Ms. Brown,

As per our telephone conversation this afternoon, I am enclosing the cover letter and pages 1, 2, and 3 of the Articles of Amendment to Articles of Incorporation of Operation Restoration, Inc. I also included your original letter and materials to me.

Please do not hesitate to contact me regarding this matter. You may email me at SDAcevedo@yahoo.com or phone me on my cell phone at (561) 308-5349. Messages may be left at my home phone number: (561) 625-4102.

The Board of Directors and I await your response so that we may begin to use the amended name.

Sincerely,

A handwritten signature in black ink, reading "Sheila D. Acevedo", with a long, sweeping horizontal line extending to the right.

Sheila D. Acevedo, President
(Friends of) Operation Restoration, Inc.
3205 Gardens E. Drive, Unit A
Palm Beach Gardens, FL 33410



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 24, 2009

SHELLA D ACEVEDO
FRIENDS OF OPERATIONS RESTORATION, INC.
3205 GARDENS E DR UNIT A
PALM BEACH GARDENS, FL 33410

SUBJECT: OPERATION RESTORATION, INC.
Ref. Number: N25199

We have received your document for OPERATION RESTORATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please complete and return all pages of the amendment.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 709A00036402

Articles of Amendment
to
Articles of Incorporation
of

Operation Restoration, Inc

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

N25199

(Document Number of Corporation (if known))

FILED
2009 DEC -4 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Friends of Operation Restoration, Inc.

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**)

3205 Gardens E. Drive

Unit A

Palm Beach Gardens, FL 33410

C. Enter new mailing address, if applicable:

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

3205 Gardens E. Drive

Unit A

Palm Beach Gardens, FL 33410

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:

Sheila D. Acevedo

New Registered Office Address:

3205 Gardens E. Drive, Unit A

(Florida street address)

Palm Beach Gardens

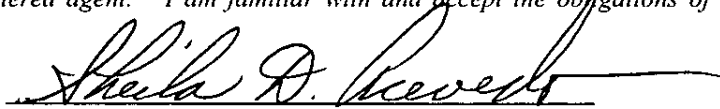
(City)

Florida 33410

(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

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
D	Graham Jacks	302 Riverside Drive Palm Beach Gardens FL 33410	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
D	Michael Bell	1346 12th Fairway Wellington, FL 33414	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
D	Dorrett Barnes	5959 Coy Glen Way Lake Worth FL 33463	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Not Applicable

The date of each amendment(s) adoption: November 10, 2009

Effective date if applicable: December 10, 2009
(date of adoption is required)

(no more than 90 days after amendment file date)

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 November 30, 2009

Signature

Sheila D. Acevedo, President/Director

(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)

Sheila D. Acevedo

(Typed or printed name of person signing)

President/Director

(Title of person signing)