14400002741

e #)
MAIL
ine)
)
s of Status





400364720704

04/23/21--01001--019 **30.00

04/23/21--01001--020 **5.00

PECFIVED
2021 APR 22 PM 4:44
SECRETARY OF STATE



COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: . BOX 1602 Sherr: tuglor 1957 Ogma: (. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Aruc	tes of Athenamo	. ii t		
Articl	to es of Incorporat	tion		
Name of Corporation as currently filed with the Florida	- Hrie	<u>Our</u>	Fulna	e Inc
Na4000		a / . \		
(Document Num	ber of Corporati	on (if known))	
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this <i>Florida</i>	Not For Pro	fit Corporation a	dopts the following
A. If amending name, enter the new name of the corpora	ation:			
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	cation" or "incor	porated" or i	the abbreviation	The new "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u>)	Σ)			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)				
				
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		lorida, ente	r the name of the	
Name of New Registered Agent:				
New Registered Office Address:		(Florida s	treet address)	
		·	Florida	
	(Ciţy)		(Zip ((Tode)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f		accept the o	bligations of the p	position
	Signature of New	Registered 2	Igent, if changing	<u> </u>

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 Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change Add		_		
Remove				
2) Change Add				
Remove 3) Change Add Remove		-		
4) Change Add		-		
Remove				
5) Change Add		_		
Remove				
6) Change Add				
Remove				
E. If amending or addin (attoch additional shee			cles, enter change(s) here: (Be specific)	
Children f providing e 1.fr Coping and Adul	fre duc. sk.	Our Liona 11s J W. Ll	Future is Organized and enrichment action For Veterans, Juvenils of Disabilities.	ed exclusively for 1.tis as well as Senior C.I.you

•		
		
		
		
		
		
		
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not boartment of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s).	

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 $\frac{1}{2221}$
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)
Sherrie Taylor (Typed or printed name of person signing)
Director
(Title of person signing)