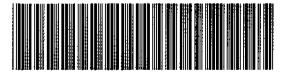


(Requestor's Name)	
(Address)	
(Address)	:
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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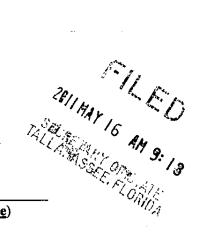
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: H.E	.R.O.E.S., INC.	1044-1448-1
		•	
DOCUMENT NUM	BER: N90	600000 ZB24	
The enclosed Articles	of Amendment and fee are	submitted for filing.	
Please return all corre	spondence concerning this	matter to the following:	
	BRAD	VAN HORN e of Contact Person)	
	(Name	e of Contact Person)	
	H.E.R.O.E.	5. INC. / FOUNDATION AC	ADEMY
	(1	Firm/ Company)	
	3675 San	PABLO ROAD SOUTH	
	<u> </u>	PABLO ROAD SOUTH (Address)	
	—	227711	
	JACKSONVI	State and Zip Code)	
	(City/	State and Zip Code)	
		POUNDATIONACADEMY. CO	
	E-mail address: (to be	used for future annual report notifica	ation)
For further information	n concerning this matter, pl	ease call:	
Bea	o Van Horn	904 \ 31B	-3598
(Name	of Contact Person)	at (904) 318 (Area Code & Daytin	ne Telephone Number)
		de payable to the Florida Department	•
⊠ \$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)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 passee, FL 32314	Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Center	ons

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



H.E.K.O.E.S. INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
N96000002824	

(Document Number of Corporation (if known)

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:

The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." <u>"Company" or "Co." may no</u> t	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3675 SAN PABLO ROAD SOUTH JACKSONVILLE, FL 32224
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3675 SAN PABLO ROAD SOUTH JACKSONVILLE, FL 32224
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad-	
Name of New Registered Agent: Brad	VAN HORN
	AN PABLO ROAD SOUTH ida street address)
	Florida FL 322
JA	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am	(City) (Zip Code)

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>	Address	Type of Action
EXECUTIVE DIRECTOR	BRAD VAN HORN	4159 CHET'S CREEK DR. E. JACKSONVILLE, FL 32224	☑ Add ☐ Remove
BOARD MEMBER	NADIA HIDNIDES	47 11 STREET ATLANTIC BEACH, FL 32233	☑ Add ☐ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter cl tional sheets, if necessary). (Be specific		
			
			···
475. 5. 4. 5. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.			

The date of each amendment(s) a	doption: 5/9/11
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.
Dated	0/11
Signature Ma	Am
(By the chave not	chairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or art appointed fiduciary by that fiduciary)
	Chris Hionides (Typed or printed name of person signing)
	(Title of person signing)

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