

N96000004679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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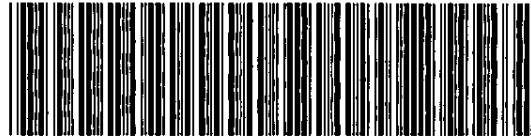
(Business Entity Name)

(Document Number)

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JANUARY 14 2014

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FAMILY PROMISE OF GAINESVILLE FL, INC.

DOCUMENT NUMBER: N96000004679

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

Please return all correspondence concerning this matter to the following:

GWAIN DAVIS

(Name of Contact Person)

FAMILY PROMISE OF GAINESVILLE, FLORIDA, INC.

(Firm/ Company)

229 SW 5TH ST

(Address)

GAINESVILLE, FL 32601

(City/ State and Zip Code)

GAINESVILLEIHN@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SAMUEL A. MUTCH

(Name of Contact Person)

at (352) 378-5599

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

FAMILY PROMISE OF GAINESVILLE FL, INC.

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

N96000004679

(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:

A. If amending name, enter the new name of the corporation:

FAMILY PROMISE OF GAINESVILLE, FLORIDA, 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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (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

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14 JAN 14 PM 4:35
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P/D</u>	<u>Samuel A. Mutch</u>	<u>2114 NW 40th Terr</u> <u>Ste A-1</u> <u>Gainesville, FL 32605</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V/D</u>	<u>Michael Lattimer</u>	<u>602 NW 33rd Ave</u> <u>Gainesville FL 32608</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T/D</u>	<u>Sherrie Kirk</u>	<u>1826 W University Ave</u> <u>Gainesville FL 32603</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S/D</u>	<u>Lynne Mayer</u>	<u>1521 NW 34th St</u> <u>Gainesville FL 32605</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S/D</u>	<u>Helen McCune</u>	<u></u> <u></u> <u></u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Joy Erbes</u>	<u></u> <u></u> <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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Gina Giovinco</u>	<u>700 NW 39th Rd</u> <u>Gainesville FL 32607</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Renee Zenaida</u>	<u>602 NW 33rd Ave</u> <u>Gainesville FL 32608</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Otto Johnston</u>	<u>1826 W University Ave</u> <u>Gainesville FL 32603</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Rosy Cautaurucci</u>	<u>4000 NW 53rd St.</u> <u>Gainesville FL 32653</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Tony Cautaurucci</u>	<u>4000 NW 53rd St</u> <u>Gainesville FL 32653</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Beth Haines</u>	<u>4000 NW 53rd St</u> <u>Gainesville FL 32653</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ANNUAL REPORT WAS FILED JANUARY 7, 2014 UNDER THE PRESENT NAME, FAMILY PROMISE OF GAINESVILLE, FL, INC.

CHANGES IN NAMES OF OFFICERS AND DIRECTORS ARE CURRENT PER THE ANNUAL REPORT SUBMITTED JANUARY 7, 2014..

INITIAL NAME WAS "IHN OF GREATER GAINESVILLE, INC." CHANGED DECEMBER 12, 2013.

MISTAKE WAS MADE IN SUBMISSION OF NAME CHANGE ON DECEMBER 12, 2013 AS "FLORIDA" WAS NOT SPELLED-OUT.

THIS NAME CHANGE RECOGNIZES THE CPELLING-OUT OF "FLORIDA" RATHER THAN THE POSTAL ABBREVIATION.

The date of each amendment(s) adoption: DECEMBER 15, 2013, if other than the date this document was signed.

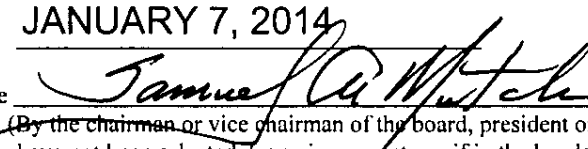
Effective date if applicable: DECEMBER 15, 2013
(no more than 90 days after amendment file date)

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 JANUARY 7, 2014

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)

SAMUEL A. MUTCH

(Typed or printed name of person signing)

PRESIDENT / DIRECTOR

(Title of person signing)