

N96000005110

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

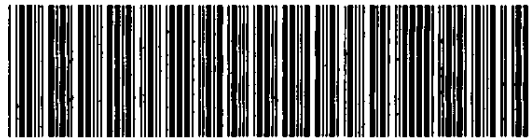
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FILED  
10 APR 16 PM 5:02  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Amend/Name Chg.  
Jm 4/16/10

**COVER LETTER**

**TO: Amendment Section**  
Division of Corporations

**NAME OF CORPORATION:** FAMILY SUPPORT<sup>1</sup> LIFE MANAGEMENT SERVICES INC

**DOCUMENT NUMBER:** N96000005110

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

Please return all correspondence concerning this matter to the following:

MAURICE PHILLIPS

(Name of Contact Person)

FAMILY SUPPORT LIFE MANAGEMENT SERVICE INC

(Firm/ Company)

1550 NW 110TH AVE APT349

(Address)

PLANATION FLORIDA 33322

(City/ State and Zip Code)

BLAQBOI84@GMAIL.COM

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

For further information concerning this matter, please call:

MAURICE PHILLIPS

(Name of Contact Person)

at ( 954 ) 9372751

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 24, 2010

MAURICE PHILLIPS  
1550 NW 110 AVE  
PLANTATION, FL 33322

SUBJECT: FAMILY SUPPORT AND LIFE MANAGEMENT SERVICES, INC.  
Ref. Number: N96000005110

We have received your document for FAMILY SUPPORT AND LIFE MANAGEMENT SERVICES, 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6957.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 810A00007228

RECEIVED  
2010 APR -7 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Family Support and Life Management Service Inc

**DOCUMENT NUMBER:** N96000005110

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

Please return all correspondence concerning this matter to the following:

Maurice Phillips

Name of Contact Person

Family Support and Life Management Service Inc

Firm/ Company

1550 NW 110TH AVE APT 349

Address

PLANATION FLORIDA 33322

City/ State and Zip Code

blaqboi84@gmail.com

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

For further information concerning this matter, please call:

Maurice Phillips

Name of Contact Person

at ( 954 )

9372751

Area Code & Daytime Telephone Number

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

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**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 SUPPORT<sup>1</sup> LIFE MANAGEMENT SERVICES INC.**

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

**N96000005110**

(Document Number of Corporation (if known))

FILED

10 APR 16 PM 5:02

DEPT. OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

**GIVE IT BACK FOUNDATION INC.**

*The new*

*name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

**1550 NW 110TH AVE APT 349**

**PLANATION FLORIDA 33322**

**C. Enter new mailing address, if applicable:**

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

**1550 NW 110TH AVE APT 349**

**PLANATION FLORIDA 33322**

**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:

**MAURICE PHILLIPS**

New Registered Office Address:

**1550 NW 110TH AVE APT 349**

(Florida street address)

**PLANATION**

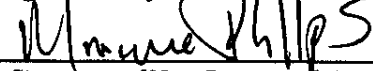
(City)

**Florida 33322**

(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>
<u>P</u>	<u>JESSE THOMAS</u>	<u>1523 NW 23 AVE</u> <u>FT. LAUDERDALE FLORIDA</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>V</u>	<u>JANICE CARTER</u>	<u>4760 NW 19TH COURT</u> <u>LAUDERHILL, FLORIDA 33313</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>S</u>	<u>ROLAND HATCH</u>	<u>4431 SW 33RD DRIVE</u> <u>FT. LAUDERDALE FL 33308</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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

NONE

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
*(if not applicable, indicate N/A)*

NONE

The date of each amendment(s) adoption: 3/30/2010  
(date of adoption is required)  
Effective date if applicable: 4/02/2010  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☒ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by MAURICE PHILLIPS  
(voting group)"

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 3/30/2010

Signature

Maurice Phillips  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MAURICE PHILLIPS

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)