N98000001126

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Health Education and Community Resource, Inc
DOCUMENT NUMBER: N9800001126
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Zelma Dickerson (Name of Contact Person)
(Firm/ Company)
8370 Earl Circle W.
Jacksonville FL 32219 (City/State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Zelma Dickerson at (904) 764-0483 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Scrifficate of Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallabassee, EL 32314 is enclosed) Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of	oi incorpora	ation	12/2
Hor 1th Education and (of	iti Rosin	The Trace of the same
(Name of Corporation as currently	filed with th	e Florida Dent. of	State)
A LAC ARRAGA LLAC	Inca with th	c i policia Dept. ol	State Mark
N9800000112	6		~
(Document Number of	of Corporatio	n (if known)	
Pursuant to the provisions of section 617.1006, Flori the following amendment(s) to its Articles of Incorporate		his <i>Florida Not Fo</i>	or Profit Corporation adopts
A. If amending name, enter the new name of the The Sound In My South The new name must be distinguishable and contain abbreviation "Corp." or "Inc." "Company" or	L, I	つひ。 'corporation'' or "	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B			
D. If amending the registered agent and/or regist new registered agent and/or the new registered			enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Florid	a street address)	
			, Florida
		(City)	, Florida (Zip Code)
New Designand Agent's Signature if sha-sign D	logistaned A ~	anti	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered age	ent. I am fa	ent: imiliar with and a	ccept the obligations of the
position.			

Signature of New Registered Agent, if changing

		, enter the title and name of each off	
	nd title, name, and address of e litional sheets, if necessary)	ach Officer and/or Director being ad	<u>ded:</u>
<u>Title</u>	Name	Address	Type of Action
			Add Remove
	ding or adding additional Artic dditional sheets, if necessary).		
٠.	Λ	Name: The name of	The corporation
		In My Soul, Inc.	
.		1 '	 .
Amer	ded Article I	Irincipal place of bu	sines and mailing
addre			s, 902 S. Edgund Avenue
Jacks		2205. The mailing	
Corpor	onon 15: 20:10 E	ar I Circle West, Jackson	Wille, FL. 32219.
Ameri	lad Article III i	Jurpose(s): This corpu	ma trin in il l
mida.	educational down	Topmental, and sup	mrtive) Sprvings
n addi	res They holistic	needs of individu	als The
10rixor	ation will str	ive to be the comm	nunitys
Dremie	ere educational	developmental an	d resource
edice	enter for cross	-cultural octual	ization of
	peoples.		
	f I		

The date of each amendment(s) adoption:
Effective date if applicable: (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.
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)
(Typed or printed name of person signing)
(Title of person signing)

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