## 1198000005967

(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
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2022 SEP 23 AM 10: 48
SECRETARY OF STATE

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Vanese Agape F NAME OF CORPORATION:	family Services and Learn	ning Center, Inc	>. 
N98000005967 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Jacqueline Craig Henderson			
	(Name of Contact Po	erson)	
Vanese Agape Family Services and Learning Cer	nter, Inc.		
	(Firm/ Company	y)	
980 Bayberry Lane			
	(Address)		· ·
Rockledge, FL 32955			
	(City/ State and Zip	Code)	· · ·
jesuslovesmc2@yahoo.com			
E-mail address: (to be	used for future annual rep	port notification	n)
For further information concerning this matter, pl	lease call:		
Jacqueline Craig Henderson	at	321	631-0206
(Name of Contact Pe	- <del></del> -	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	de payable to the Florida	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of State	& □\$43.75 Filing Feetus Certified Copy (Additional copy i enclosed)	Certif is Certif	D Filing Fee icate of Status ied Copy tional Copy is osed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation oſ

FILED 2022 SEP 23 AM 10: 48

(Document Number of Corporation (if known)  (If LATHESSE, FL  (Document Number of State)  (If known)  (The new is in Articles of Incorporation adopts the following of its Articles of Incorporation adopts the following of Incorporation adopt	(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 intendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  N/A  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   N/A  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:  N/A  (Florida street address)  New Registered Office Address:  New Registered Office Address:		of		3 AM 10:
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(City) (Zip Code)	'aw Dagistared Agent's Signature, if changing Dagistered Agents		(City)	(Zip Code)	
(City)	New Registered Agent's Signature, if changing Registered Agent:	new registered agent and/or the new registered of New Registered Agent:	Mice address:	(Florida street address)	orida
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:	B

(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 John Do Y Mike Jo SV Sally So	ones		
Type of Action (Check One)	Title	Name	Address	
1) <u>×</u> Change Add	<u>D</u>	Cherice Te'She Blunt	10221 Neversink Ct Orlando, FL 32817	
Remove				
2) Change Add	<del></del>			
Remove 3) Change Add Remove	<del></del>			
4) Change Add				
Remove				
5) Change Add				
Remove				
6) Change Add				
Remove				
E. If amending or adding (attach additional sheet)	g additional Artions, if necessary).	cles, enter change(s) here: (Be specific)		
ARTICLE II:				
MISSION - Our mission is	s to develop and s	upport programs that directly input and impro	ve the lives of individuals and	
families through community involvement and charitable donations.				
<del></del>				

We desire to see youth, familie	s, and elderly communities live thriving lives that will positively impact the traject	tory of
their future.		<del></del>
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	August 30, 2022	
The date of each amendments date this document was signed.	(s) adoption:	, if other than th
•	September 1, 2022	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we was/were sufficient for app	ere adopted 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.				
Signature Casqueline Laig Hardinan				
(I) 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)				
Jacqueline Craig Henderson				
(Typed or printed name of person signing)				
Co-President				
(Title of person signing)				