## P070000444400

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SECRETA CHEST STATIONS STATE OF 15

Amend, 13 (10) 12.19.13

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	A110N	HELP CENTER	R, INC		
DOCUMENT NUMB	ER: P0700004446	6			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	JACQUELIN DAG	QUIN			
•		Name of Contact Persor	l		
_	ORLANDO HELP CENTER, INC				
		Firm/ Company			
_	21 N TAMPA AVENUE				
Address					
	ORLANDO, FL 32				
		City/ State and Zip Code			
Sjda	aquin@aol.com	•			
	•	ed for future annual report	notification)		
For further information	concerning this matter, pleas	م ممال			
Tor further information	concerning this matter, pleas	e can.			
JACQUELIN	DAQUIN	at (407	<u>872-1350</u>		
Name o	f Contact Person	Area Coo	de & 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)		
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

## **Articles of Amendment** to Articles of Incorporation of



## ORLANDO HELP CENTER, INC.

ent(s) to

(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this <i>Florida Pre</i>	ofit Corporation ado	ots the following ame
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Cot word "chartered," "professional association," or th	rp," "Inc," or "Co". A pr		
s. Enter new principal office address, if applicab Principal office address <u>MUST BE A STREET AL</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	BOX)		
). If amending the registered agent and/or regist new registered agent and/or the new registere		ida, enter the name	of the
Name of New Registered Agent		-	
<del></del>	(Florida street address)		
New Registered Office Address:	(City)	, Florida	(Zip Code)
New Registered Office Address:  New Registered Agent's Signature, if changing R hereby accept the appointment as registered agent	legistered Agent:		,

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: X_Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	SABINE DAQUIN	21 N TAMPA AVANUE
Add			ORLANDO, FL 32805
Remove			
2) Change	S	MARTA ST. CATHERINE	21 N TAMPA AVENUE
Add			ORLANDO, FL 32805
Remove			
3) Change	<u>s</u>	MIREILLE HYACINTHE	5624 HARBOR CHASE C
<b>√</b> Add			ORLANDO, FL 32839
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artic ttach additional sheets, if necessary).	(Be specific)
	···· ··· ··· ··· ··· ··· ··· ··· ··· ·
_	
<u>- 11 </u>	
an amendment provides for an excherovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and in the amendment itself:
<del></del>	
<u> </u>	

The date of each amendment		, if other than the
date this document was signed.		
Effective date if applicable:	12/01/2013	
	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement and 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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	
Dated_12/0	01/2013	
Signature		
	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	oppointed fiduciary by that fiduciary)	
	JACQUELIN DAQUIN	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	_