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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	? #)
PICK-UP	WAIT	MAIL .
(Bu	siness Entity Nar	ne)
(Do	cument Number)	·
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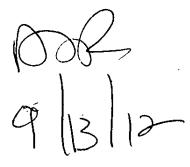


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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 1 HOPE YOU NEVER NEED IT INC
DOCUMENT NUMBER: P11000042968
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
1 HOPE YOU NEVER NEED IT INC Firm/Company
2651 NE 186 TERR
N HIAHI BEACH FL 33180 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JANET ROTSHTYN at 305 , 935-4100
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

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Articles of Amer to Articles of Incorp of 1 HOPE YOU NEVER NEE (Name of Corporation as currently filed with the Flori P10000 42968 (Document Number of Corporation (if kn	D 17 10 2012 SEP 1 1 PM 3: 10 D 17 10 2012 SEP 1 I PM 3: 10 Ida Dept. of State) SEURE IART OF STATE TALLAHASSEE. FLORIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
TOY FAITH AND HOPE RECO name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	520 NW 8 ST FORT LANDERDALE PL 33311
	2651 NE 186 TERR NORTH HIAHI BEACH PL 33180
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent ARTE ROTSH 520 NW 8 ST (Florida street de	TYN FORT LANDERDALF, FL 33311
New Registered Office Address: (City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered Agent.	a and accept the obligations of the position. nt, 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 hecessary)

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	JANET ROTSHTYN	2651 NE 186 TERR
Add Remove			PL 33180
2) Change	_ P	ARYE ROTSHTYN	520 NW 8 ST FORT LAWDERDALE
Remove			PC 33311
3) Change			
Add			
4) Change			
Add			
5) Change			
Add			
6) Change			
Add			
Remove			

amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
	, <u> </u>
	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: 9 112
Effective date if applicable: 91112
(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
☐ 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 9/1/12
Vis ACEAN
(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)
JANET ROTSHTYN
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)