P16000077219

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FALLAHASSEE, FLORDA

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. I Fredrick L ONeal request the Name Heavenly Ansels Group Home, Inc be released. We are Not Soing to reinstate the old Document Number P13000019103.

5/10/2017

-(5-7-0

TO HAY TO AH II: I'V

COVER LETTER

TO: Amendment Section Division of Corporations Heavenly Angels, INC NAME OF CORPORATION: P16000077219 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Heavenly 102 W 5th Address Tallalvassee Fl City/ State and Zip Code tredrick or eal Gatt. net (to be used for future annual report notification) For further information concerning this matter, please call: at (850) SO9-41860 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fcc □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607. \$\dagger\$06. 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: Heaven't Awals Capour Home, Inc. 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: Florida (City) (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

address of each Officer and/or Director (Attach additional sheets, if necessary) Please note the officer/director title by the P = President; V = Vice President; T = The Executive Officer; CFO = Chief Financia held. President, Treasurer. Director would Changes should be noted in the following			first letter of the office title: pasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Officer. If an officer/director holds more than one title, list the first letter of each office be PTD. manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is jon, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change,		
X Change	PT	John I	oc		
X Remove	<u>v</u>	Mike	<u>ones</u>		
X Add	<u>sv</u>	Sally S	<u>mitlı</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address	
1) Change		-			
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		~			
Add				•	
Remove					
4) Change					
4) Change Add		-			
Remove					
Kemove				**	
5) Change		-			
Add					
Remove					
6) Change		_			
Add					

_ Remove

E. <u>If amending or adding additional Art</u>	rcles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
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	·
F. If an amendment provides for an exc	ange, reclassification, or cancellation of issued shares.
provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption date this document was signed.	5/10/2017	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not of State's records.	ot be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	mendment(s) was/were sufficient for approval	
by	(voting group)	
,		
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder	
action was not required	the incorporators without shareholder action and shareholder	
Dated 5/10/2	017	
Sia-abara	500	
(By a director, selected, by an	president or other officer — if directors or officers have not been incorporator — if in the hands of a receiver, trustee, or other count lary by that fiduciary)	•
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	