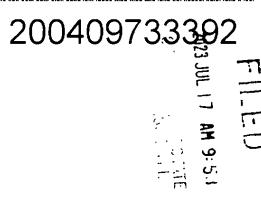
(Requestor's Name)
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(Busiless Ellity Name)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: RJ'S HOME OF H	OPE AND WHOLENESS	CORP					
DOCUMENT NUMI	BER:	· · · · · · · · · · · · · · · · · · ·						
The enclosed Articles	of Amendment and fee are su	bmitted for filing.						
Please return all corre	spondence concerning this ma	tter to the following:						
	Raymond Julmiste							
	Name of Contact Person							
	RJ'S HOME OF HOPE AND WHOLENESS CORP							
	<del></del> -	Firm/ Company						
	4841 Pond Pine Way							
		Address						
	Greenacres Fl 33463							
		City/ State and Zip Code	2					
	Rjulmiste@gmail.com							
	E-mail address: (to be us	sed for future annual report	notification)					
For further informatio	n concerning this matter, pleas	se call:						
Raymond Julmiste		at (	913-0371					
Name	of Contact Person	Area Co	de & Daytime Telephone Number					
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:					
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Ame Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303					

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

В	2115	HOME	OF	HOPE	AND	WHOL	ENESS	CORP

ration as currer	itly filed with the Flor	ida Dept. of Stat	^ \
			<b>E</b> )
ocument Number	of Corporation (if kno	wn)	
		•	following amendment(s)
ie corporation:			
			The new
Inc," or "Co".	A professional corpo		
able:	N/A		
ADDRESS )			107
			37
(BOX)	N/A		
			39
		<del></del>	5.
			<u> </u>
		r the name of the	
(Florida .	street address)		<del></del>
		Florida	N/A
	(City)	,1101144	(Zip Code)
	l "corporation:  I "corporation,"  Inc, " or "Co".  bbreviation "P.A  able:  4DDRESS)	l "corporation." "company." or "incorporation." or "Co". A professional corporation "P.A."    N/A     N/A	istered office address in Florida, enter the name of the red office address:  (Florida street address)  ["corporation," "company," or "incorporated" or the ablence. A professional corporation name must be be be be be be be be since a professional corporation name must be

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

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) X Change	VD	Marie Julmiste	N/A
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		•	
Remove			

(Attach additional sheets, if necessor	ary). (Be spec	cific)			
I/A					
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					<del></del>
				-	
71/2					
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If an amendment provides for ar	exchange, rec	lassification, or	cancellation of i	ssued shares,	
provisions for implementing the	amendment i	f not contained	in the amendme	nt itself:	
(if not applicable, indicate N	<b>A</b> )				
/A					
		<del> </del>	·		
		· · · · · · · · · · · · · · · · · · ·		<del></del>	
	· ·				

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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	nent(s)
	pproved by the shareholders through voting groups. The following stoor each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	``	
	(voting group)	
Dated 6)	1/11/273	
6:		
selec	director, president or other officer – if directors or officers have not b ted, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	
	Raymond Julmiste	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

. .