## P21000020502

·· (F	Requestor's Name)	
· · · · · · · · · · · · · · · · · · ·		
(/	Address)	
(/	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL MAIL
	L	
(1	Business Entity Name)	
(1	Document Number)	
		_
Certified Copies	Certificates of S	Status
Special Instructions to F	iling Officer:	
	-	
•		
		1
		ļ
		1
		j

Office Use Only



700433210517

NC & Amend



JULTT 2024 A RAMSEY 2011 JUL 16 PH 3: 05

CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 07/16/24 Order #: 1554965-1

Re: Helping Hands Search, Inc. Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$35.0 - FL State Account Number: 12000000195

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## Articles of Amendment to Articles of Incorporation

2024 JUL 16 AMI1: 57 Helping Hands Search, Inc. (Name of Corporation as currently filed with the Florida Dept, of State) P21000020502 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, 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: Anchors Array, 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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; 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

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,

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PD	Darrin L. Rohr	2910 University Pkwy
Add			Sarasota, FL 34243
x Remove			
2) Change	PTD	Fouad EiNaggar	
× Add			
Remove 3) Change	<u>V</u>	Jonathan Davis	
X Add			
Remove			<del></del>
4) Change	S	Andrew Rankin	
x Add			
Remove			
5) Change			·
Add			
Remove			
6) Change		<del></del>	
Add			
Ramova			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
'A	
<del>-</del>	
<del></del>	
<del></del>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
A	
<b>***</b> ·	

The date of each a date this document	July 10, 2024  mendment(s) adoption:, if other than the was signed.
Effective date if ar	oplicable:
	(no more than 90 days after amendment file date)
	nserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
Adoption of Amen	dment(s) (CHECK ONE)
☐ The amendmente action was not re	(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder equired.
	(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) ders was/were sufficient for approval.
	(s) was/were approved by the shareholders through voting groups. The following statement ely provided for each voting group entitled to vote separately on the amendment(s):
"The numb	per of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voling group)
D	July 10, 2024
S	ignature(By a director, president or other officer – if directors or officers have not been
	(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)
	Jonathan Davis
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)

AMEND-15010