# N10000001591

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# **COVER LETTER** '

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: H.O.P.E. MINI	STRIES ONLINE, INC.	
DOCUMENT NUM	IBER: N10000001591		
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corr	espondence concerning this matt	ter to the following:	
	DANIEL	LA BELLITTO	
`	(Name of	Contact Person)	
	(Firm	n/ Company)	
	9858 GLA	ADES RD. #200	
	(/	Address)	
		TON, FL 33434	
	(City/ Star	te and Zip Code)	
	DANIELABEL E-mail address: (to be use	LITTO@AOL.COM d for future annual report notifica	tion)
For further informati	on concerning this matter, please	e call:	
DANIELA BELLI	гто	at (561)_756-320	0
(Name	e of Contact Person)	(Area Code & Daytin	ne Telephone Number)
Enclosed is a check t	for the following amount made p	ayable to the Florida Department	of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	A \$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 ndment Section sion of Corporations Box 6327 shassee, FL 32314	Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	

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

## H.O.P.E. MINISTRIES ONLINE, INC.

#### (Name of Corporation as currently filed with the Florida Dept. of State)

### N10000001591

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A WOMAN'S HA	VEN THRIFT STORE, INC.	
The new name must be distinguishable and combined by the company of the company o		
3. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
<ol> <li>If amending the registered agent and/or new registered agent and/or the new reg</li> </ol>		enter the name of tl
		enter the name of th
new registered agent and/or the new reg		enter the name of th
new registered agent and/or the new reg	istered office address:	enter the name of

# 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
D .	FRANK BELLITTO	9858 GLADES RD. #200	□ Add
<del></del>		BOCA RATON, FL 33434	☑ Remove
<u>D</u>	TIFFANY CHIARENZA	9858 GLADES RD. #200_	☑ Add
		BOCA RATON, FL 33434	☐ Remove
<u>D</u>	ALEXA ENGLISH	9858 GLADES RD. #200	☑ Add
		BOCA RATON, FL 33434	☐ Remove
	g or adding additional Articles, enter c ional sheets, if necessary). (Be specific		
			<del>,</del>
	· <del>····································</del>		

The date of each amendment(s)	adoption: 09/09/2010
Effective date <u>if applicable</u> :	(date of adoption is required) 09/09/2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or me adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were etors.
Dated 09/09/	2010
Signature Z	Januelee Lecletto
have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, o court appointed fiduciary by that fiduciary)
	DANIELA BELLITTO
	(Typed or printed name of person signing)
	EXECUTIVE DIRECTOR
	(Title of person signing)

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