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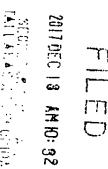
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Compas.  NAME OF CORPORATION:	s Urban Stewardship Mir	nistries. Inc.			
N140000002	76				· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and	I fee are submitted for fil	ing.			
Please return all correspondence concerni	ng this matter to the follo	owing:			
Kenneth Battles					
	(Name of C	ontact Person	)		
Compass Urban Stewardship Ministries					
<del></del>	(Firm/	Company)			
6295 Bordeaux Circle					
	(Ad	ldress)			
Sanford, FL. 32771					
	(City/ State	and Zip Code	)	-	
ken.battles@compassurban.org					
E-mail address	: (to be used for future a	nnual report n	otification	)	
For further information concerning this m	atter, please call:				
Kenneth Battles		407 at		756-7039	
(Name of Co	ntact Person)			(Daytime Teleph	one Number)
Enclosed is a check for the following amo	ount made payable to the	Florida Depar	rtment of S	State:	
	iling Fee & \$\Bigsigs\$	Copy al copy is	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Section		Street / Amendr	Address nent Secti	on	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

Compass Urban Stewardship Ministries , ILC >			
(Name of Corporation as curre	ently filed with the F	lorida Dept. of State)	
N1400000276			
(Document Nun	nber of Corporation (i	fknown)	
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	ites, this Florida Not	For Profit Corporation 2	dopts the following
A. If amending name, enter the new name of the corpora	ation:		
N/A			The new
name must he distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorpora	ted" or the abbreviation	
B. Enter new principal office address, if applicable:	N/A		
Principal office address <u>MUST BE A STREET ADDRESS</u>	$\left[\underline{\mathbf{c}}_{\mathbf{j}}\right]$		201
	-		E. C.
		<del></del>	
C. Enter new mailing address, if applicable:	N/A		୍ଷ ଅନ
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			5
		<del></del>	<del>- 3</del>
			<u></u>
D. If amending the registered agent and/or registered of	Connddon in Floris		
new registered agent and/or the new registered office		ia, enter the name of the	<u> </u>
N/A Name of New Registered Agent:			
Hame of New Negational Agent.			
		(Florida street address)	
New Registered Office Address:			
		, Florida	l
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f		ept the obligations of the	nosition.
<del></del>	Signature of New Reg	gistered Agent, if changin	

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 X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	T	Joe Bingham Sr.	342 Cabana Way View
Add			Sanford, FL. 32771
X Remove			
2) Change	T	Sharon K. Battles	6295 Bordeaux Circle
XAdd			Sanford, FL. 32771
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	ticles, enter change(s) here (Be specific)			
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The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Iffective date if applicable:	
(no more than	90 days after amendment file date)
<b>Sote:</b> If the date inserted in this block does not meet the a locument's effective date on the Department of State's rec	applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	<u>E</u> )
The amendment(s) was/were adopted by the members was/were sufficient for approval.	s and the number of votes east for the amendment(s)
There are no members or members entitled to vote or adopted by the board of directors.	the amendment(s). The amendment(s) was/were
Dec 11, 2017 Dated	
Signature Roule	
· · · · · · · · · · · · · · · · · · ·	of the board, president or other officer-if directors or proporator – if in the hands of a receiver, trustee, or that fiduciary)
Kenneth Battles	
(Typed	or printed name of person signing)
President	
<del></del>	(Title of person signing)