

N29435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400264226304

400264226304
09/12/14--01041--007 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 SEP 12 AM 11:23

Amend
@ 9.19.14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LIFE IMPACT NETWORK, INC.

DOCUMENT NUMBER: N29435

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICIA K. LAYTON
(Name of Contact Person)

LIFE IMPACT NETWORK, INC.
(Firm/ Company)

3030 STARKY BLVD. SUITE 182
(Address)

NEW PORT RICHEY, FL 34655
(City/ State and Zip Code)

patlayton@mac.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICIA K. LAYTON at (813) 205-3274
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

LIFE IMPACT NETWORK, INC.

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

N 29435

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 SEP 12 AM 11:23

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. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

3030 STARKY BLVD.

SUITE 182

NEW PORT RICHEY, FL 34655

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

3030 STARKY BLYD.

SUITE 182

NEW PORT RICHEY, FL 34655

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: _____

New Registered Office Address: _____
(Florida street address)
3030 STARKY BLVD., STE 182

NEW PORT RICHEY, Florida 34655
(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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>C</u>	<u>BLAKE GAYLORD</u>	<u>3935 VENETIAN WAY</u> <u>TAMPA, FL 33634</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>LESLEY BATEMAN</u>	<u>P.O. Box 320341</u> <u>TAMPA, FL 33679</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>JEANETTE SCARBORO</u>	<u>4841 SKY BLUE DR.</u> <u>LUTZ, FL 33558</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>DOUG PRICE</u>	<u>1550 RIDGE TOP DR.</u> <u>TARPON SPRINGS, FL</u> <u>34688</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>RONN KELLY</u>	<u>10562 GREENSPRINGS DR.</u> <u>TAMPA, FL 33626</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>DOUG HINDERS</u>	<u>15142 NIGHTHAWK DR.</u> <u>TAMPA, FL 33625</u>

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|---|---------------|------------------------|--------------------------------|
| 1) <input type="checkbox"/> Change | <u>D</u> | <u>MARILYN HINDERS</u> | <u>15142 NIGHTHAWK DR.</u> |
| <input checked="" type="checkbox"/> Add | | | <u>TAMPA, FL 33625</u> |
| <input type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change | <u>VP</u> | <u>JAYNE SOLOMON</u> | <u>10336 CARROL COVE PLACE</u> |
| <input checked="" type="checkbox"/> Add | | | <u>TAMPA, FL 33612</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | <u>D, CFO</u> | <u>MICHAEL LAYTON</u> | <u>3444 COWART ST.</u> |
| <input checked="" type="checkbox"/> Add | | | <u>NEW PORT RICHEY, FL</u> |
| <input type="checkbox"/> Remove | | | <u>34655</u> |
| 4) <input type="checkbox"/> Change | <u>P, CEO</u> | <u>Patricia Layton</u> | <u>3444 Cowart St</u> |
| <input type="checkbox"/> Add | | | <u>New Port Richey, FL</u> |
| <input type="checkbox"/> Remove | | | <u>34655</u> |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: 7/1/14 if other than the date this document was signed.

Effective date if applicable: 7/1/14
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 9/16/14
Signature [Handwritten Signature]
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

PATRICIA K. LAYTON
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)