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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:		HEDO CHUR	CH OF ST. MARY OF ADDIS ALE
N49537 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
BEKELE, BERHANU			
(N:	ame of Contact Per	rson)	
		 	
	(Firm/ Company)	
7006 EARLY GOLD LANE			
	(Address)	<u> </u>	
RIVERVIEW, FL 33569			
(Ci	ity/ State and Zip C	Code)	
bbekele@live.com			
E-mail address: (to be used for	r future annual rep	ort notification)
For further information concerning this matter, please call	1:		
BEKELE, BERHANU	at	813	679-4982
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made payab	ole to the Florida D	epartment of S	tate:
(\$43.75 Filing Fee & Certified Copy Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Clif 266	cet Address endment Section vision of Corpo fton Building of Executive Collabassee, FL 32	rations enter Circle

Articles of Amendment Articles of Incorporation

THE ETHIOPIAN ORTHODOX TEWAHEDO	CHURCH	OF ST. MARY OF	FADDIS ALEM, INC! 19 SET 10 PH 5.1
(Name of Corporation as currently filed with the Florida Dept, of State) (Document Number of Corporation (if known) arsuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following mendment(s) to its Articles of Incorporation: If amending name, enter the new name of the corporation: N/A The new 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. Enter new principal office address, if applicable; rincipal office address MUST BE A STREET ADDRESS) N/A N/A			
N4 9537			•
(Docur	nent Numl	ber of Corporation (i	f known)
rursuant to the provisions of section 617.1006, Flomendment(s) to its Articles of Incorporation:	rida Statut	es, this Florida Not	For Profit Corporation adopts the following
. If amending name, enter the new name of the	corpora	tion:	
N/A			The new
~~	•	ation" or "incorpora	
3. Enter new principal office address, if applica	ble:	N/A	
		N/A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	N/A	
		N/A	
			la, enter the name of the
Name of New Registered Agent:	N/A		
	N/A		
			(Florida street address)
<u>New Registered Office Address:</u>			
	N/A		
		(City)	(Zip Code)
			ept the obligations of the position.
	N/A		
-		Signature of New Res	gistered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	C	Assefa, Tirusew, Phd	P.O. BOX 2884
Add X Remove			TAMPA, FL 33601
2) Change	<u>s</u>	Nassa, Kibirgeta	P.O. BOX 2884
Add X Remove			TAMPA, FL 33601
3)Change	<u> </u>	HAILU, KONJIT	P.O. BOX 2884
X Remove			TAMPA, FL 33601
4) Change	D	Habte, Thomas	P.O. BOX 2884
Add X Remove			TAMPA, FL 33601
5) Change	D	Melaku, Behailu	P.O. BOX 2884
Add X Remove			
6)Change	<u>v</u>	Muluken Damessa	P.O. BOX 2884
X Add Remove			TAMPA, FL 33601

New board members

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 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: XChange X Remove X Add	Y Mi	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change Add	<u>C</u>	Daniel Mossisa	P.O.B 2884
Remove			TAMPA, FL 33601
2) Change Add	<u>T</u>	Selam Fekre Sellassie	P.O.B 2884
Remove 3) Change	Ð	Elsa Aragaw	TAMPA, FL 33601 P.O.B 2884
Add			TAMPA, FL 33601
4) Change X Add	<u>s</u>	Helina Mekonen	P.O.B 2884
Remove			TAMPA, FL 33601
5) Change		<u>~/A</u>	
Remove			
6) Change Add		~/A	
Remove		Page 3 of 4	

nending or adding addition the additional sheets, if necessity	ssary). (Be specific)			
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			1/5/2018			
The	date of each amer	dment(s) add	option:			, if other than to
date	this document was	signed.				
		1/5/2	018			
Eff	ective date <u>if appli</u> e	able:				
			(no more than	90 days after amendment file date	?)	
	e: If the date insert ument's effective da			applicable statutory filing requirer cords.	nents, this date will not	be listed as the
Ado	option of Amendm	ent(s)	(CHECK O	<u>ve</u>)		
	The amendment(s) was/were sufficient		•	rs and the number of votes cast for	the amendment(s)	
	There are no mem adopted by the bo			n the amendment(s). The amendm	nent(s) was/were	
	Dated	9/5/2019				
	-	Mu	man H			_
				n of the board, president or other o		
			n selected, by an in ppointed fiduciary l	orporator – if in the hands of a rec y that fiduciary)	eiver, trustee, or	
		BEKELE	, BERHANU			
			(Тур	d or printed name of person signin	g)	
		Elder/Pr	esident			
			- · · · · · · · · · · · · · · · · · · ·	(Title of person signing)		•



St. Mary of Addis Alem Inc.

2418 South 86 St. Tampa, FL 33619 Tel: (813) 626-6042

9/6/2019

Amendment Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida, 32301

Dear Sir / Madam

Please find the Enclosed Check # 1752 in the amount of \$35.00 for payment of amending the former Board members, for being removed and for the new Board members for being added..

Thank you for your cooperation

Sincerely yours,

Rev. Brerhanu Bekele

Mutter

Elder/President

The Ethiopian Orthodox Tewahedo Church of St. Mary Addis Alem ,Inc Document Number N49537