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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION: Afican-Americ	an Family Liaison C	Organization
DOCUMENT NU	мвек: <u>N9900004212</u>		
The enclosed Artic	les of Amendment and fee are sub	omitted for filing.	
Please return all co	rrespondence concerning this mat	ter to the following:	
	S	/Ivia Lee	
	(Name of	Contact Person)	
	AJ Thomas Outrea	ch Ministries Organizat	ion
	(Firm	/ Company)	
		nway Ridge Drive	
	(,	Address)	
		v Florida 33579	
	(City/ Sta	te and Zip Code)	
	ajministri E-mail address: (to be use	es@yahoo.com d for future annual report n	otification)
For further informa	ation concerning this matter, pleas	e call:	
Sylvia Lee		at (813 ₎ 943	-9787
(Nar	ne of Contact Person)		Daytime Telephone Number)
Enclosed is a check	for the following amount made p	ayable to the Florida Depar	tment of State:
\$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address Amendment Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	orations Center Circle

Articles of Amendment Articles of Incorporation of

African-American Faimily Liaison Organization 🚉 (Name of Corporation as currently filed with the Florida Dept. of State)

N99000004214

(Document Number of Corporation (if known)

The state of the s 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:

AJ Thomas Outrea	ach Ministrie	s Organization 🕁	<u>C.</u>
The new name must be distinguishable and col abbreviation "Corp." or "Inc." <u>"Company" or</u>			corporated" or the
3. Enter new principal office address, if appli	icable:	8014 Capwood Av	venue
Principal office address <u>MUST BE A STREET</u>		Temple Terrace	Florida 33637
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)	13112 Fennway R	idge Drive
		Piverview Florida 33570	
D. If amanding the registered agent and/or re	wistored office	Riverview Florida	
D. If amending the registered agent and/or re new registered agent and/or the new regist Name of New Registered Agent:		address in Florida, ei	
	tered office ad	address in Florida, ei	

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)

<u>Title</u>	Name	Address	Type of Action
CDMC	Alecia Thomas	8014 Capwood Avenue Temple Terrace Florida 33637	☑ Add ☐ Remove
COC	John Hayes, Jr.	1014 Meadowcrest Drive Valrico Florida 33594	☑ Add ☐ Remove
PC	John Lee, Jr.	13112 Fennway Ridge Drive Riverview Florida 33579	☑ Add □ Remove
E. If amending (attach addition	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific	hange(s) here:	
		* ************************************	

	The date of each amendment(s) adoption: 7- 29-10
ş .	· (date of adoption is required)
	Effective date if applicable: (no more than 90 days after amendment file date)
	(no more than 90 days after amenament fite 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_September 24,2010
	Signature John Lux Ja.
	(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, of other court appointed fiduciary by that fiduciary)
	John Lee, Jr.
	(Typed or printed name of person signing)
	President Chairman
	(Title of person signing)

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