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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Treater	Mean youth For Christ
DOCUMENT NUMBER: 70	Meani youth For Christ, 0
The enclosed Articles of Amendment and fee are sub	
Please return all correspondence concerning this matt	•
William Rod	uguez
	(Marie of Contact Person)
Same	Amendment and fee are submitted for filing. Indence concerning this matter to the following: Witten Rodrigues (Yarme of Contact Person) Same as above (Firm/ Company) 9350 SW 79th Ave. (Address) The Amendment and fee are submitted for filing. (Address) Willie & Manufyc. Com E-mail address: (to be used for future annual report notification) concerning this matter, please call: Am Rodrigues (Name of Contact Person) at (305) 37/-3445 (Area Code) (Daytime Telephone Number) the following amount made payable to the Florida Department of State:
	(Firm/ Company)
9350	SW 79th Ave.
Thea	mi FL. 33156
	(City/ State and Zip Code)
Willie @ M	manifyc.com
E-mail address: (to be used	d for futuro∕annual report notification)
For further information concerning this matter, please	e call:
William Rodigue	2 at (305) 271-2442
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a gheck for the following amount made p	ayable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

greater Miami Jac	with For Chri	st Duc.
(Name of Orporation as currently filed with the Flo		
	10/3/5)
(Document	Number of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:	A The new
name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name. B. Enter new principal office address, if applicable:	<i>A</i>	or the abbreviation "Corp." or "Inc."
(Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	N/	A S
D. If amending the registered agent and/or registered new registered agent and/or the new registered of New Registered Agent:		nter the name of the
	,	
New Registered Office Address:	(Flori	da street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		e obligations of the position.
	Signature of New Registers	ed 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 = Cl. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officerly 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. The 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 Chamike Jones, V as Remove, and Sally Smith, SV as an Add.

Type of Action (Check One) Change	Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
	Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
	1) Change Add	BM	JAMES KERN	15725 SW 188# S MIAMI, FL 33187
Remove Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change Add Remove F. If amending or adding additional Articles, enter change(s) here:	Remove 2) Change			
AddRemove 5)Change	Remove 3) Remove Add			
5)Change				-
Add	5) Change Add			
E. If amending or adding additional Articles, enter change(s) here:				
	E. If amending or ad-	ding additional Aneets, if necessary	Articles, enter change(s) here: o). (Be specific)	
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The date of each amundment(s) ada	option:	if other the
data this do summer use signed	ption:	, ir other the
date this document was signed.		
1250 sales duas 15 man llambios		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
Note: If the date incerted in this blood	k does not meet the applicable statutory filing requirements, this date will	not be listed as th
		not be fisted as if
document's effective date on the Department	artificity of State 8 records.	
Admidian of American	(CHECK ONE)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	opted by the members and the number of votes cast for the amendment(s)	
was/were sufficient for approval		

Dated $\frac{9/22/2020}{}$
Signature Blen Craig
(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)
SEENN CRAIG
(Typed or printed name of person signing)

(Title of person signing)