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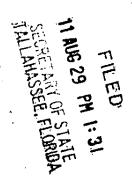


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TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: St Demetrios G	reek Orthodox Commu	nity of Broward
DOCUMENT N	NUMBER: 701860		
The enclosed Ar	ticles of Amendment and fee are subm	nitted for filing.	
Please return all	correspondence concerning this matter	r to the following:	
-		nou, Jr., Esq.	
	(Name of C	Contact Person)	
	loannou &	Ioannou, LLP	
<u></u>	(Firm/	Company)	·
	11125 NW	' 124th Street	•
_		ldress)	
	Modley	FL 33178	
-	Medley (City/ State	FL 33178 and Zip Code)	
_		oulaw.com for future annual report notificat	ion)
For further infor	mation concerning this matter, please of	call:	
John Ioannou	, Jr., Esq.	at (786) 787-0425	
(N	ame of Contact Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a che	eck for the following amount made pay	able to the Florida Department of	of State:
✓ \$35 Filing Fe	e ☐ \$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)
]]	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

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St. Demetrios Greek Orthodox Community of Broward County of STATE (Name of Corporation as currently filed with the Florida Dept. of State)

	701860	
(Document N	umber of Corporation (if known)	
cursuant to the provisions of section 617.100 the following amendment(s) to its Articles of		ot For Profit Corporation adopt
A. If amending name, enter the new name	of the corporation:	
St. Demetrios Greek Orthod	dox Church of Ft. Lauderdale	, Florida, Inc.
The new name must be distinguishable and abbreviation "Corp." or "Inc." <mark>"Company"</mark>		
B. Enter new principal office address, if a		
Principal office address <u>MUST BE A STRI</u>	EET ADDRESS)	
•		
		
C. Enter new mailing address, if applicabe (Mailing address MAY BE A POST OF)		
(mailing universe MAT BE A FOST OF I	FICE BUX)	
	· · · · · · · · · · · · · · · · · · ·	
. If amending the registered agent and/or	r registered office address in Flo	rida, enter the name of the
new registered agent and/or the new re		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street addres	os)
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if chan	ging Registered Agent:	
hereby accept the appointment as register osition.		nd accept the obligations of the
_	Cignostano of Nov. Decistore J. Le-	ut if aboveing
	Signature of New Registered Ages	n, y cnanging

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 Type of Action** Address ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) :	adoption: January 1, 2011
	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or mem adopted by the board of directors	abers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated 8 7 9 V	1-11 Muh
(By the	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
	CHRISTOPHER NICHOLS
	(Typed or printed name of person signing)
	President
	(Title of person signing)