

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MY FATHER'S HOUSE LIMITED, INC.

DOCUMENT NUMBER: F10000002874

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

Please return all correspondence concerning this matter to the following:

Ingris Sanchez
(Name of Contact Person)

My Father's House Limited, Inc.
(Firm/ Company)

4420 Del Prado Blvd. S
(Address)

Cape Coral, FL. 33904
(City/ State and Zip Code)

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

For further information concerning this matter, please call:

Ingris Sanchez at (239) 677-9222 / 8390281
(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 type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" 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

FILED

MY FATHER'S HOUSE LIMITED, INC. ¹⁵ JAN 7 10:26

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

F10000002874

(Document Number of Corporation (if known))

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:

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)

4420 Del Prado Blvd.
Cape Coral, FL 33904

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 152226
Cape Coral, FL 33915

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:

INGRIS SANCHEZ

4420 Del Prado Blvd. S - Cape Coral, FL 33904

(Florida street address)

New Registered Office Address:

Cape Coral

(City)

, Florida

FL 33904

(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.

Ingris Sanchez T

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>

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|-------------|------------------------|--|
| 1) <input checked="" type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>PC</u> | <u>SSEKIRANDA</u> | <u>2628 Del Prado</u>
<u>Bld. Cape Coral, FL</u>
<u>33904</u> |
| 2) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>VP/C</u> | <u>Dominguez V.</u> | <u>2524 SW 22pl</u>
<u>Cape Coral, FL</u>
<u>33914</u> |
| 3) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>VP/C</u> | <u>Ingris Sanchez</u> | <u>4420 Del Prado Blvd.</u>
<u>Cape Coral, FL</u>
<u>33904</u> |
| 4) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>D</u> | <u>Montañez Luz M.</u> | <u>2524 SW 22pl.</u>
<u>Cape Coral, FL.</u>
<u>33914</u> |
| 5) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>Ingris Sanchez</u> | <u>4420 Del Prado Blvd.</u>
<u>Cape Coral, FL</u>
<u>33904</u> |
| 6) <input checked="" type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>TR</u> | <u>Semajw Charles</u> | <u>P.O BOX 8075</u>
<u>Kampala</u>
<u>Uganda</u> |

7. Type of Action

Title Name Address

X Change

TR Sekamanyie P.O. BOX 8075
Deogracias

 Add

KAMPALA

 Remove

UGANDA

8

 Change

TR. Sr. Joana P.O BOX 7
Nalu

X Add

Entebbe

 Remove

Uganda

The date of each amendment(s) adoption: 12/17/2014, if other than the date this document was signed.

Effective date if applicable: 12/17/2014
(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

Dec. 17 - 2014

Signature

Rev. [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)

Rev. Remigious Ssekiranda

(Typed or printed name of person signing)

President and Chairman - mpsh.

(Title of person signing)