## N00000001933

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	LY & CHILDREN FAIT	TH COALITION, INC.	
N0000000	1933		
DOCUMENT NUMBER:			····
The enclosed Articles of Amendment a	nd fee are submitted for	filing.	
Please return all correspondence conce	ning this matter to the fo	llowing:	
Josie Martinez			
	(Name of	Contact Person)	
FAMILY & CHILDREN FAITH CO	ALITION, INC		
	(Firm	/ Company)	
550 NW 42 Ave			
	(/	Address)	
Miami FL 33126			
	(City/ Sta	te and Zip Code)	
jmartinez@hopeformiami.org			
E-mail addr	ess: (to be used for future	annual report notification	1)
For further information concerning this	matter, please call:		
Josie Martinez		786 at	388-3000
(Name of	Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following a	nount made payable to th	ne Florida Department of	State:
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Mailing Address		Street Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FAMILY & CHILDREN FAITH COALITION, INC.

and the second of the second o			11 D . CO	`		
(Name of Corporation	as current	tly filed with the Flor	ida Dept. of State	<u>:</u> )		
N00000001933						
(Docur	nent Numbe	er of Corporation (if k	nown)			
		·				
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not Fo</i>	r Profit Corporati	on adopts	the foll	owing
A. If amending name, enter the new name of the	e corporati	on:				
X IA					776.	e new
name must be distinguishable and contain the word	l "corporat	ion" or "incorporated	l" or the abbrevia	tion "Corp		
"Company" or "Co." may not be used in the nam	<u>e</u> .	·				
D. Enter now aginginal office address if annion	blar	~\a				
B. Enter new principal office address, if applica Principal office address MUST BE A STREET A					_	
			·			
C. Enter new mailing address, if applicable:		<i>(</i> 1.				
(Mailing address MAY BE A POST OFFICE	<u>BOX</u> )					
				_		
				<u>;;</u>		
D. If amen <u>ding the reg</u> istered agent and/ <u>or</u> regis	stored offic	a address in Florida	anter the name o	ftho	9 0	
new registered agent and/or the new register			circi the hame o	<u> </u>		$T_{i}$
	Josie Mart	inez			Γ.J.	
<u>Name of New Registered Agent:</u>				•	je u	<del></del> -
	550 NW 4	2 Avc.				
		(F)	orida street address)	ž. :	<del>-1.9</del>	
<u>New Registered Office Address</u> :				>-	ψ1	
	Miami		. Fle	orida 3312	6	
		(City)		Zip Code)		
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			the obligations of	the positie	127	
incress decept the appointment as registered agen	u. Tumyur	mar min una accept	ine omganisms og	me posine	·/··	
		- 5 m	, —			
-		~ {	and decour if he	ngine		
		gnature of ivew Kegis	orea Agent, if that	nguig		

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:  X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Treasure	Douglas Halc	11740 SW 107 Ave
Add			Miami FL
X Remove			33176
2) Change Add	AA	A   A	N A
Remove 3 )ChangeAdd	KIA	~ \ \ A	NA 3
Remove 4) Change Add Remove	NA		7 A S S S S S S S S S S S S S S S S S S
5) Change Add Remove	No		~   A
6) Change Add	<u> </u>		A   A
Remove			

E. If amending or adding additional Arti	icles, enter change(s) here:
(attach additional sheets, if necessary).	(Be specific)
——————————————————————————————————————	· · · · · · · · · · · · · · · · · · ·
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Effec	this document was signed.  10.16.19  tive date if applicable:  (no more than 90 days after amendment file date)	
<u>Note:</u>	tive date if applicable:	
	(no more than 90 days after amenament file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	e listed as the
Adop	otion 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	
	Signature Charles Facus (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)	_
	Charles F. Sawyer V. (Typed or printed name of person signing)	
	·	5 KV 22 130 61