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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Freedom	Outreach Center, Inc.			
DOCUMENT NUMBER: N000000 (₀5 <i>2</i> 0			
The enclosed Articles of Amendment and fee are submitte				
Please return all correspondence concerning this matter to	the following:			
Tonja Fili	more			
· (- ····				
Freedom Oi	utreach Center, Inc (Firm/Company)			
	(Firm/ Company)			
1348 Old Apopka f	Rd.			
	(Address)			
Apopka, Fl. 32703 (City/ State and Zip Code)				
(City/ State and Zip Code)				
Freedom outreach a E-mail address: (to be used for	popka@gmail.com			
For further information concerning this matter, please call:				
Tonja Filmore (Name of Contact Person)	at 407 - 448-4404			
(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:				
, (A	43.75 Filing Fee & Status Certified Copy Additional copy is enclosed) \$\square \square \squar			
Mailing Adduses	Street Address			

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

treedom Whre	ech Center	~, Inc-
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)
N000001	006520	
(Document	Number of Corporation (if I	(nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation addition the following
. If amending name, enter the new name of the con	rporation:	TAKE TO THE
ame must be distinguishable and contain the word "co Company" or "Co." may not be used in the name.		d" or the abbreviation "Corp. 2 or "Ino."
B. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADD</u>	<u>KESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of Name as Name of Name Basistaned Agents	ed office address in Florida	, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(<i>P</i>	Florida street address)
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Regination hereby accept the appointment as registered agent. I		t the obligations of the position.
	Signature of New Regis	stered 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: X Change X Remove X Add	PT John I V Mike SV Sally S	<u>Jones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	T	Tonja Filmore	#365 Orlando, Fl. 32835
2) Change Add	<u>D</u>	Mehuin Birdsong	246 N. Washington Ave. Apopka, Fl. 32703
Remove 3) Change Add Remove	\square	Jerry Girley	1350 Vickers Lake Dr. Ocoee, Fl. 34761
4) Change Add Remove	5	Phyllis Girley	1350 Vickers Lake. Dr. Ocoee, F1. 34761
5) Change Add Remove	D	Brooke Girley	1350 Vickers Lake Dr. Oco-ee, F1 34761
6) Change Add Remove			
		TD	

	Iding additional Arthreets, if necessary).						
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 Signature (By the chafman 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) Tonja filmare (Typed or printed name of person signing)	The date of each amendment(s) addate this document was signed.	option;	, if other than the
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 (By the charman 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) Tonja filmare (Typed or printed name of person signing)		(no more than 90 days after amendment file date)	
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(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) Tonja Filmare (Typed or printed name of person signing)	Dated	19/17 DA	
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Tonja filmare (Typed or printed name of person signing) Treasurer		Sharing abalance of the board provident on other officer	· if directors
Treasurer	have not bee	n selected, by an incorporator - if in the hands of a receiver,	
Treasurer		Tonja Filmare (Typed or printed name of person signing)	
		· ·	