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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Youth Challenge of Florida, Inc.
DOCUMENT NUMBER: NO 1355
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ruben E. acosta, Ess. Treasurer
Low Office of Rober E. auto LC
(Flrm/Company) * 10 Grand ST (2nd Floor)
(Address)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ruber E. Rooy Ja, Esg. at (860) 798-3123 (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: \$\frac{1}{2}\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

Mailing address: PO Box 550 West Simbbory, CT 06092

Articles of Amendment to Articles of Incorporation of

YOUTH CHALLENGE OF FLORIDA, INC.

Name of Corporation as currently filed with the Florida D	ept. of State)	
N01355		
(Document Number	er of Corporation (if kn	own)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
		The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	ion" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		701
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	·	بين .
		10
		PH 3: 35
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		بب
		ن س
N. M		and another manner of the
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office as		enter the name of the
•		
Name of New Registered Agent:	_	
New Registered Office Address:	H· to	rida street address)
	(City)	, Florida (Zip Code)
	, , , , ,	(III) Coloco
New Registered Agent's Signature, if changing Registered		de la Elevate un afab a municipa.
I hereby accept the appointment as registered agent. I am far	пшаг мип апа ассерн	ne oragations of the position.
Sir	gnature of New Registe	red Agent if changing
-11)	gramme of men negate	received in criming ing

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 De V Mike Jo SV Sally Se	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	Prestr	Ronald Bailey	2697 Perry Quence Bronx, NY 10468
Remove 2) Change Add	Director	Richard Gonzalez	9402 CR 125 C W. W. Wird; FL 34785
Remove 3) Change Add		Riv. Eight Gonzalez-Torrej	21 May Street Hortford, Conn. 06109
Remove 4)ChangeAdd	Director	Rev Vanossa Rodriguez-Cruz	49 Sargeant Street Hortford, COAA 06105
Remove 5) Change Add			
Remove 6)ChangeAdd			
E. If amending or addi (attach additional she		icles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adopti	ion: Jone 18, 2021	if other than the
data this document was signed	TO TAKE	Other than the
date this document was signed.		
	- 1. til	
Effective date <u>if applicable</u> :	1 wmi hall by	
	I wou di a te ly (no more than 90 days after amendment file date)	
Note: If the date inserted in this block d	oes not meet the applicable statutory filing requirements, this date will not b	e listed as the
document's effective date on the Departi		- noted to the
aocument s'encenve date on me teparti	ment of state 8 feeting.	
Adoption of Amendment(s)	COLUMN AND	
	(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 Tuber E Quist: Ssg., Treasure (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)
Ruben E. acusda
(Typed or printed name of person signing)
Treasurer of YCF (Title of person signing)