Division of Corporations **Electronic Filing Cover Sheet** 

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(((H120001184573)))



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To:

Division of Corporations

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From .

Account Name

, BLANCHARD, MERRIAM, ADEL & KIRKLAND, P.A.

Account Number: I20000000117

Phone Fax Number : (352)732-7218 1 (352) 732-0017

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN

COMPASSION ALLIANCE, INC.

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### (((H120001184573)))

### COVER LETTER

Division of Corporations	Ť
NAME OF CORPORATION: Compassion Alliance	e Inc.
DOCUMENT NUMBER: N0400006384	
The enclosed Articles of Amendment and fee are submitted for filin	g.
Please return all correspondence concerning this matter to the follow	ving:
Edwin A. "Trip" Green, III,	Esquire
Name of Co	ntact Person
Blanchard, Merriam, Adel d	& Kirkland, P.A.
Firm/ Co	ompany
P.O. Box 1869	
Add	ress
Ocala, FL 234478-1869	•
City/ State a	nd Zip Code
TO as an @DMAK! and Com	•
TGreen@BMAKLaw.Com  E-mail address: (to be used for future an	
E-mail address. (to be fised for infinite an	muni report nonneanon)
For further information concerning this matter, please call:	
Edwin A. "Trip" Green, III, Esq.	352 732-7218
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Pl	orida Department of State:
S35 Filing Fee S43.75 Filing Fee & Cl\$43.75 Filing Fee & Certified Co (Additional enclosed)	opy Certificate of Status
Matting Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

# (((H12000118457 3))) Articles of Amendment to

111 110101	of	
Compassion Alliance, Inc.		
(Name of Corporation as currently filed with the Flo	rida Dept, of State)	
N0400006384		:
(Document Number of Corpor	ation (if known)	· <del>-</del>
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corp	poration adopts the following
A. If amending name, enter the new name of the corporati	on:	
Crossroads Alliance & Ministries, Inc.		The new
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abb	
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A	
C. Enter new mailing address, if applicable:	NI/A	
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		,
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office at N/A  Name of New Registered Agent:		me of the
THE PARTY OF THE P		→
New Registered Office Address:	Florida siveet address)	-
	, Plorida	ı
(City)	(Zip	Code)
lew Registered Agent's Signature, if changing Registered a hereby accept the appointment as registered agent. I am fan		ns of the position.
Standard CYL Books		-
Signature of New Regist	,	<del></del>
P	age 1 of 4	ZOIZ APA 30 SECRETARY

#### (((H120001184573)))

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	<u>PT</u>	John Doe	
X Remove	<b>X</b>	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	. Name	Address
1) Change Add Remove		·	
2) Change Add Remove	<u> </u>		
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove	<u> </u>		
6) Change Add Remove			

# (((H12000118457 3)))

E. If amending or adding additional Art	icles, enter change	e(s) here:			
E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	·			
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# (((H120001184573)))

The	e date of each amendment(s) adoption: April 26, 2012
	April 26, 2012
	(no more than 90 days after amendment file date)
Ado	option 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.
	Deted 30 April 2012
	Att. De
	Signature Avenue (all all all all all all all all all al
	Steven R. Ewing
	(Typed or printed name of person signing)
	President
	(Title of person signing)