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SECRETARY OF STAT

Amond C.COULLIETTE

AUG 21 2009

**EXAMINER** 

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MANA BENEV	/OLEN	T OUTF	REACH INC	C
DOCUMENT NUM	BER: N0500005398				
The enclosed Articles	s of Amendment and fee are sub	mitted for	filing.		
Please return all corre	espondence concerning this matt	er to the f	ollowing:		
	RUBEN LIMA				
	(Name of	Contact P	erson)		
MANA BENEVOLENT OUTREACH INC.					
	(Firm/ Company)				
	3621 NE 13TH AVENUE				
	(A	(ddress)			
	POMPANO E	BEACH.	FL 33064	4	
	(City/ Stat	<u>`</u>			
	RUBEN.LIMA				
	E-mail address: (to be used	l for futur	e annual re	port notification	on)
For further information	on concerning this matter, please	call:			
RUBEN LIMA		at (	954	304-5049N	1
(Name	of Contact Person)		(Area Co	de & Daytime	Telephone Number)
Enclosed is a check for	or the following amount made pa	ayable to t	he Florida	Department of	State:
☑ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	Certifi	,	is	□ \$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			Division of Clifton Bu 2661 Exec	ent Section of Corporations	rcle

\* Note, if you can please rush this thru

## Articles of Amendment to Articles of Incorporation of

## MANA BENEVOLENT OUTREACH INC.

(Name of Corporation as currently file	<del></del>	260)
N0500005		<u>ite</u> )
(Document Number of Co		
Pursuant to the provisions of section 617.1006, Florida S the following amendment(s) to its Articles of Incorporati	Statutes, this Florida Not For P.	rofit Corporation adopts
A. If amending name, enter the new name of the corr	ooration:	
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co." n		orporated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	ESS )	O9 AU
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		G 20 PH 3:
		AIG AIGA
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	office address in Florida, entice address:	er the name of the
Name of New Registered Agent:		·····
New Registered Office Address:	(Florida street address)	_
	(City)	_, Florida (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. position.	e <mark>red Agent:</mark> I am familiar with and accep	t the obligations of the
Signature (	of New Registered Agent if char	nging

	the Officers and/or Directors, enter t		
	title, name, and address of each Official sheets, if necessary)	icer and/or Director being added	<u>:</u>
<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			
			Remove
			□ Add □ Remove
	ng or adding additional Articles, ente		
Upon the di	ssolution of the organization, ass	sets shall be distributed for or	ne or more exempt
purposes w	ithin the meaning of section 501	(c) (3) of the Internal Revenu	ıe Code, or
correspondi	ng section of any future federal t	ax code, or shall be distribut	ed to the federal
government	, or to a state or local governmen	nt, for a public purpose. Any	such assets not
disposed of	shall be disposed of by the Cour	t of Common Pleas of the co	unty in which the
principal offi	ce of the organization is then loc	cated, exclusively for such pu	rposes or to such
organization	or such organizations, as said (	Court shall determine, which	are organized and
	clusively for such purposes.		M
		<u> </u>	

The date of each amendmen	t(s) adoption: 0	8/03/2009
Effective date <u>if applicable</u> :	08/03/2009	(date of adoption is required)
	(no moi	re than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CH</u>	IECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the roval.	members and the number of votes cast for the amendment(s)
There are no members or adopted by the board of di		to vote on the amendment(s). The amendment(s) was/were
hav	thechairman or the not been selection	vice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, of fiduciary by that fiduciary)
	(Ty <sub>l</sub>	RUBEN LIMA ped or printed name of person signing)
	P	PRESIDENT/FOUNDER/CEO
		(Title of person signing)