N06000004218

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	<u> </u>
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: New Horizon Outreach Ministry, INC
DOCUMENT NUMBER: 40000004218
The enclosed Articles of Amendment and fee are submitted for filing.
The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following:
Michael E. Griffin
New Horizon Outreach Ministry, INC (Firm/Company)
127. NE 15th St
(Address)
Gainesville, Fl. 32641 (City/State and Zip Code)
(City/ State and Zip Code)
newhorizon outreach 9740 gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nichael E. Griffo at 352 081 - 7685 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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:
\$35 Filing Fee \$\ \begin{align*} \b
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Ar	of)n	
New Horizon 0	utreach	ministry, l	NC
(Name of Corporation as cu	urrently filed with the	e Florida Dept. of State)	
N06000004	218		2013 SEP
	Number of Corporation	ı (if known)	S
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida N</i>	ot For Profit Corporation adopt	
A. If amending name, enter the new name of the corp	oration:		5
			〈
name must be distinguishable and contain the word "cor	maration" or "ingger	orated" on the abbuniation "Co	The new
"Company" or "Co." may not be used in the name.	portation of incorpt	oratea or the appreviation Col	rp. or inc.
	122	r with ch	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	FSS)	E 15th St Ville, Fl. 32641	
Trincipal office data ess most be A STREET ADDR.	GAINESU	ille, Fl. 32641	
			
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			2013
	•••		438 438
			_
D. If amending the registered agent and/or registered	affice address in Fla	mide enter the name of the	
new registered agent and/or the new registered off		rida, chief the hame of the	云
	.		Ç.
Name of New Registered Agent:			
			d •
		(Florida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code	<u></u>

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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	<u>V</u> <u>Mike</u>	Doe 2 Jones 7 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	VP	Roderick Johnson	1604 Sty 40ther Apt 40 Gainesuille, Fl. 32607
2) Change Add	<u>S</u> _	Marva Nelson	500 SE 18th ST. Apt W. 164 Chainesville, Fl. 32641
Remove 3) Change Add		Courtney Reynolds	1017 NW 42nd Ave Gainesville, Fl. 32609
Remove 4) Change Add Remove	<u>P</u>	Crystal Griffin	Soil HE 77th Ave Gainesville, Fl 32609
5) Change Add _★_ Remove	<u>vP</u>	Alesha C. Sampson	214. NE 26th St Gainesuille, Fl 32641
6) Change Add	5_	Martha Small	P.O. Box 953 mac Clenny, Fl 32063

E. If amending or adding additional Articles, enter change(s) here:				
(attach additional sheets, if necessary). (Be specific)				
Roderick Johnson has been added as VP.				
Marva nelson has been added as S.				
Courtney Reynolds has been added as I.				
Crystal Griffin has been removed as P				
A lesha C. Sampson has been removed as VP				
Martha Small has been removed as 5				

	e date of each amendment(s) adoption:			, if other than the
	e this document was signed. Sective date if applicable:	5, 2018		
	(no more the	n 90 days after amendme	nt file date)	
	te: If the date inserted in this block does not meet the nument's effective date on the Department of State's		ng requirements, this date will not b	e listed as the
4d	option of Amendment(s) (CHECK C	<u>DNE</u>)		
	The amendment(s) was/were adopted by the members was/were sufficient for approval.	ers and the number of vot	es cast for the amendment(s)	
Ø	There are no members or members entitled to vote adopted by the board of directors.	on the amendment(s). Th	ne amendment(s) was/were	
	Dated <u>August 1, 20</u>	318		
	Signature Manager	1	- 10 m	-
	(By the chairman or vice chairm have not been selected, by an in other court appointed fiduciary	ncorporator - if in the hand		
	Michael (Typ	ped or printed name of per	son signing)	
	Fresidan	(Title of person sig	STOV (ming)	