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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2009 AUG 17 PM 3: 05

; ; | '; '

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: <u>UP ON THE S</u>	TREET	MINISTRY, IN	C.
DOCUMENT NUM	IBER: N06000006980			
The enclosed Article	s of Amendment and fee are sub	omitted for	filing.	
Please return all corr	espondence concerning this mat	ter to the f	ollowing:	
		rie Wrigh		
	(Name of	Contact P	erson)	
	Chevolo a	Accounti	ng, Inc.	
	(Firm	n/ Compan	y)	
	6491 Suns	et Strip -	Suite 7	
	(1	Address)		
	Sunrise,	Florida	33313	
	(City/ Sta	te and Zip	Code)	
	valriewrigl E-mail address: (to be use	ht@hotm d for futur	ail.com e annual report notific	eation)
For further information	on concerning this matter, please	e call:		
Valrie Wright		at (954) 777-008	32
(Name	of Contact Person)	·	(Area Code & Dayti	me Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to	he Florida Departmer	nt of State:
	☐ \$43.75 Filing Fee & Certificate of Status	Certif	,	□ \$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			Amendment Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	er Circle

Articles of Amendment to Articles of Incorporation of

FILED

2009 AUG 17 PM 3: 05

SECRETARY DE STATE

UP ON THE STRE	EET MINISTRY, INC.	TALLAHASSEE, FLORIDA
(Name of Corporation as current	ly filed with the Florida Dept	of State)
N0600	0006980	
(Document Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Flo		For Profit Corporation adopts
A. If amending name, enter the new name of th	ne corporation:	
The new name must be distinguishable and conta abbreviation "Corp." or " Inc." <u>"Company" or "</u>		
B. Enter new principal office address, if applications of the principal office address MUST BE A STREET A		
C. Enter new mailing address, if applicable: —(Mailing address MAY BEA POST OFFICE		
D. If amending the registered agent and/or reginew registered agent and/or the new register		da, enter 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 I hereby accept the appointment as registered agosition.	Registered Agent: gent. I am familiar with and	l accept the obligations of the

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) Title Name Address Type of Action ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Article 15. Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

The date of each amendment	(s) adoption: August 12th, 2009
Effective date <u>if applicable:</u>	(date of adoption is required) August 12th, 2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or adopted by the board of di	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated Aug	ust 12th, 2009
Signature	Sand Dagai
hav	the chairman or chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, over court appointed fiduciary by that fiduciary)
	Sandra Daggins
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

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