## N06000011078

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Temple of Deliveran	ce Community Outro	each Inc		
NO	6000011078				
DOCUMENT NUMBER:			<u></u>	·	<del></del>
The enclosed Articles of Amend	lment and fee are subm	nitted for filing.			
Please return all correspondence	concerning this matte	r to the following:			
Rita Jackson					
	-	(Name of Contact P	erson)	·	
Temple of Deliverance Commu	nity Outreach Inc				
		(Firm/ Compan	y)		
2606 E 29th Ave					
		(Address)			
Tampa, FL 33605					
		(City/ State and Zip	Code)		
savedandbeautiful@yahoo.com	I				
E-ma	ail address: (to be used	for future annual re	port notifica	tion)	
For further information concern	ing this matter, please	call:			
Rita Jackson		a	813 t	7351091	
(Na	ame of Contact Person		(Area Cod	e) (Daytime Telep	ohone Number)
Enclosed is a check for the folio	wing amount made pa	yable to the Florida	Department	of State:	
\$35 Filling Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	is Ce (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is nclosed)	

**Mailing Address** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

TEMPLE Of Deliverar	THE COMMU	nity	OUTREACH, I	nci
(Name of Corporation	as currently filed wit	th the Flor	ida Dept. of State)	
N	060000110	78	•	
(Docu	ment Number of Corpor	ration (if k	nown)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this Flori	ida Not Fo	r Profit Corporation adopts the	following
A. If amending name, enter the new name of the	e corporation:			
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		corporated	d" or the abbreviation "Corp." o	
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET A				<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i> ) N/A			
D. If amending the registered agent and/or registered agent and/or the new register		n Florida,	enter the name of the	\$ PH :
Name of New Registered Agent:	Tommie Jackson			28
name of the Aegisterea Agent.	2606 E 29th Ave		<u></u>	<del></del>
New Registered Office Address:		Æ	orida street address)	<del></del>
	Tampa		, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen		and accept	the obligations of the position.	
	Tomme	2 fr	ach	
<del>-</del>	Signature of 1	Vew Regist	ered 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		Doe 2 Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	EVANS, CHRISTOPHER RSR	deceased
Add x Remove			
2) Change	p	Tommie Jackson	2606 E 29th Ave
X Add	<del></del>		Tampa, FL 33605
Remove  3) Change	co-p, adı	Rita Jackson	2606 E 29th Av
Add			Tampa, FL 33605
Remove  4) Change	asst adm	Linda Williams	2912 E 32nd Av
× Add			Tampa, FL 33610
Remove  5) Change	<del>deacon </del>	Wayne Williams	2 <del>912 E 32nd Av</del>
Add			Tampa_FL_32610
Remove		,	
6) Change			
Add			
Remove			

E: <u>If amending or a</u> (attach additional	sheets, if necessar	y). (Be speci	ific)	<del></del>				
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The	date of each amer	dment(s) adoption:	, if other than the
late	this document was	signed.	
7 <b>65</b> 2	ective date <u>if appli</u> e	December 1, 2016	
2116	ative date <u>it appir</u>	(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this are on the Department of State's records.	s date will not be listed as the
Ada	option of Amendm	ent(s) ( <u>CHECK ONE</u> )	
	The amendment(s was/were sufficient	was/were adopted by the members and the number of votes cast for the amen t for approval.	dment(s)
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was ard of directors.	s/were
	Dated	11/30/2016	
	Signature	(By the chairman of the board, president or other officer-if d	irectors
		have not been selected, by an incorporator – if in the hands of a receiver, true other court appointed fiduciary by that fiduciary)	
		Rita Jackson	
		(Typed or printed name of person signing)	
		co-pastor/ administrator	
		(Title of person signing)	<del></del>