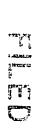
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status :	
Special Instructions to Filing Officer:	

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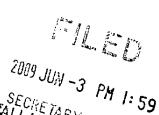
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AMERO-CONGO RELIEF FOUNDATION INC			
DOCUMENT NUME	BER: 08000002314		
The enclosed Articles	of Amendment and fee are subr	nitted for filing.	
Please return all corres	spondence concerning this matte	r to the following:	
		FRANCK KAMBA	
	(Name of C	Contact Person)	
	AMERO-CONGO RE	LIEF FOUNDATION INC	
	(Firm/	Company)	
	1167 NW 4	49TH STREET	
	(A	ddress)	
	NALANAL EL	ODIDA 22427	
			
	_	• •	
			ication)
For further information	•		
SOKOLONI FRAN	CK KAMBA	at (305) 607-22	284
(Name o	of Contact Person)		time Telephone Number)
Enclosed is a check for	r the following amount made pa	yable to the Florida Departme	ent of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☑ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
		Street Address Amendment Section	,
· ·	=		
	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Cen	tor Circle
(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			

Tallahassee, FL 32301

Articles of Amendment



	Articles of the	orporation	²⁰⁰⁹ JUN - 2	
AMERO-	of CONGO RELIEF Fration as currently filed	OUNDATION	²⁰⁰⁹ JUN -3 I INC ALLAS JARY	PM 1:59
(Name of Corpor	ation as currently filed	with the Florida D	ept. of State)'ASSEE	FIGATE
	080000023	14		-UNIDA
[]	Document Number of Cor	poration (if known)		

(Document Num	nber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		r Profit Corporation adopts
A. If amending name, enter the new name of	f the corporation:	
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" o		
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		
D. If amending the registered agent and/or r new registered agent and/or the new regis		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 position.		ccept the obligations of the
<u></u>	ignature 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
DIR	NOUSTA VOLCY	6317 NW 1 st PLACE MIAMI, FLORIDA 33150	☑ Add □ Remove
(attach a	This organization is organized e	exclusively for charitable, religion	
	ntific purposes under section 501		Code, or
correspo	nding section of any future federa	al tax code.	
We strive	to restore the image of God on I	mankind, especially "STREET	CHILDREN" in
Florida &	Congo (DRC), by providing shell	ers and security, and bringing	them back to
school. (Our Bylaws describe the different	approaches.	
	: Dissolution: Upon the dissoluti		
Revenue	Code, or corresponding section	of any future federal tax code,	or shall be
	d to the federal government, or to		**************************************
 			<u></u>

The date of each amendmen	t(s) adoption: 05/23/2009
Effective date if applicable:	05/30/2009
	(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	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_05/3	30/2009
Signature _	Ahr.
(By	the charman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	SOKOLONI FRANCK KAMBA
	(Typed or printed name of person signing)
	Incorporator & Chairman
	(Title of person signing)