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Amend

APR 11 2016 ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	DAUGHTERS OF N	MARY, MOTHER	OF MERCY (N	IIGERIA), INC.
NO DOCUMENT NUMBER:	08000002431			
		1 "11.00.0		
The enclosed Articles of Amen	dment and fee are subn	nitted for filing.		
Please return all correspondence	e concerning this matte	er to the following:		
SISTER BERNADETTE DIK	E ·			
		(Name of Contact I	Person)	
DAUGHTERS OF MARY, M	OTHER OF MERCY (NIGERIA), INC.		•
		(Firm/ Compar	1y)	
9751 SW 15TH ST	,			
		(Address)		
PEMBROKE PINES, FL 3302	5-3658			
	ı	(City/ State and Zip	Code)	
bernadettedike44@gmail.com				
E-m	ail address: (to be used	for future annual re	port notification	n)
For further information concern	ing this matter, please	call:		
SISTER BERNADETTE DIKI	3	а	t	954-397-1770
(N	ame of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	owing amount made pay	yable to the Florida	Department of	State:
■ \$35 Filing Fee C	3\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fed Certified Copy (Additional copy enclosed)	is Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)

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

TO: Amendment Section Division of Corporations

DAUGHTERS OF MARY, MO	THER OF MERCY (NIGERIA), INC.
N08000002431 DOCUMENT NUMBER:	
	lian
The enclosed Articles of Amendment and fee are submitted for fi	ing.
Please return all correspondence concerning this matter to the foll	owing:
SISTER BERNADETTE DIKE	
(Name of C	Contact Person)
DAUGHTERS OF MARY, MOTHER OF MERCY (NIGERIA)	, INC.
(Firm/	Company)
9751 SW 15TH ST ,.	
(A	ddress)
PEMBROKE PINES, FL 33025-3658	
(City/ State	and Zip Code)
bernadettedike44@gmail.com	
E-mail address: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
SISTER BERNADETTE DIKE	954-397-1770 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the	e Florida Department of State:
Sas Filing Fee Sas Filing Fee Sas Sas Filing Fee Sas	Copy Certificate of Status nal copy is Certified Copy

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2016

SISTER BERNADETTE DIKE DAUGHTERS OF MARY, MOTHER OF MERCY 9751 SW 15TH ST PEMBROKE PINES, FL 33025-3658

SUBJECT: DAUGHTERS OF MARY, MOTHER OF MERCY (NIGERIA), INC.

Ref. Number: N08000002431

We have received your document for DAUGHTERS OF MARY, MOTHER OF MERCY (NIGERIA), INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

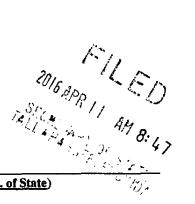
Letter Number: 316A00006419

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BIVISION OF SORPORATION

Articles of Amendment to Articles of Incorporation of



DAUGHTERS OF MARY, MOTHER OF MERCY (NIGERIA), INC.

Ditodiffers of Mater, morner of Medical		″ ≻.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)	17/2	
N08000002431		•••	
(Document Number	r of Corporation (if known)	_	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation		owinş	
1. If amending names enter the new name of the corporati	////		
		e new	
name must be distinguishable and contain the word "corporate" "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." or "	Inc.	
B. Enter new principal office address, if applicable:	9751 SW 15TH ST	•	
(Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINES, FL 33025-3658		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9751 SW 15TH ST		
	PEMBROKE PINES, FL 33025-3658		
•			
D. If amending the registered agent and/or registered offic	e address in Florida, enter the name of the		
new registered agent and/or the new registered office a			
Name of New Registered Agent:			
	(Florida street address)		
New Registered Office Address:	(1.00,000.000.000.000.000.000.000.000.000		
	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: niliar with and accept the obligations of the position.		
·	gnature 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>Mi</u>	nn <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	NJOKU, NKECHINYERE SISTER	18444 SW 293 TERRACE
Add X Remove		,	HOMESTEAD, FL 33030
2) Change	TD	ONONJUJU, CAMILLUS SISTER	18444 SW 293 TERRACE
Add X Remove			HOMESTEAD, FL 33030
3) Change	VPTD	MKPO, MAGDALENE SISTER	18444 SW 293 TERRACE
Add X Remove			HOMESTEAD, FL 33030
4) Change	<u>s</u>	OFOMA, FRANKLYN SISTER	18444 SW 293 TERRACE
Add X Remove			HOMESTEAD, FL 33030
5) Change	<u>P</u>	SISTER BERNADETTE DIKE	9751 SW 15TH ST
X Add			PEMBROKE PINES, FL 33025-36
6) Change	<u>T</u>	MARYFELIX CHARLES IKEWETI	812 MOSS OAK CT
X Add		•	INDIANAPOLIS IN 46217-4343
Remove			

sch additional sheets, if necessary).	(Be specific)	•		
			<u> </u>	
				
	, ,			
 				
		•		
· · · · · · · · · · · · · · · · · · ·				

The date	e.of.each.amendment(s) adoption: 03 18 2016
date this	document was signed.
Effective	e date <u>if applicable</u> :
	(no more than 90 days after amendment file date)
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tr's effective date on the Department of State's records.
Adoptio	or of Amendment(s) (CHECK ONE)
	amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) /were sufficient for approval.
The ado	are are no members or members entitled to vote on the amendment(s). The amendment(s) was/were appeared by the board of directors.
	(Dated) 03 18 2016
	«Signature» Bernadette Dike
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	BERNADETTE DIKE
	(Typed or printed name of person signing)
	President — (Title of person signing) = 2