N08000005274

(Re	equestor's Name)	·
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

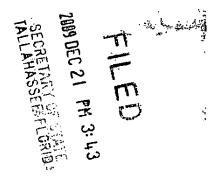
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DOZ 12/24/09

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: The Joshua 2 Foundation Inc.			
DOCUMENT NUMBER: N0800005274			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
		gbugwo Hadidian	
	(Name of	Contact Person)	
	The Josh	ua 2 Foundation	
	(Firm	n/ Company)	
	<u>_</u>	ew Court, # C210,	
	(.	Address)	
		a, FL 33609	
	(City/ Sta	te and Zip Code)	
	mandala E-mail address: (to be use	yrr@yahoo.com ed for future annual report notif	ication)
For further information	on concerning this matter, pleas	e call:	
Marilyn Ogbugwo	o Hadidian	at (813) 928-56	634
	of Contact Person)		rtime Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departme	ent of State:
	☐ \$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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee FL 32314	Street Address Amendment Section Division of Corpora Clifton Building	n ations

2661 Executive Center Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**

FILED
Cess DEC 21
TALLAHASSE OF STORE

(Name of Corporation as currently filed with the Florida Dept. of State) N08000005274 (Document Number of Corporation (if known) result to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation and following amendment(s) to its Articles of Incorporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the name. Enter new principal office address, if applicable: If amending office address MUST BE A STREET ADDRESS Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) Florida (City) (Zip Code)		્ડ	ECRETARY PM 3: 4
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New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)		dutess.	
(City), Florida (Zip Code)	Name of New Registered Agent:		
(City) (Zip Code)	Nume of New Regimered Agent.		
(City) (Zip Code)		orida street address)	
w Registered Agent's Signature if changing Registered Agent		orida street address)	 . Florida
or exception and control a computation of the computation of the control of the c			
		(City) Agent:	(Zip Code)

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	Elizabeth Ogbugwo	4601 Grayview Ct., #C210 Tampa, FL 33609	
<u>VP</u>	Jessica Steve	14535 Bruce B Downs Blvd. Tampa, FL 33613	
E. If amend (attach ad	ding or adding additional Articles, dditional sheets, if necessary). (Be	enter change(s) here: specific)	
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-			ь.
·			······································
			<u>,</u>

The date of each amendmen	t(s) adoption: 12-17-09
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
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_12-	17-09
Signature _	(Direction of the second
(By	y the chairman 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)
	Marilyn Ogbugwo Hadidian
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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