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10/21/09
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: African Network of Southwest Florida, Inc.

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eze Wokocha

(Name of Contact Person)

African Network of Southwest Florida

(Firm/ Company)

3917 5th Street West

(Address)

Lehigh Acres, FL. 33971

(City/ State and Zip Code)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eze Wokocha

(Name of Contact Person)

at (239) 530-3338

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

African Network of Southwest Florida, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

3917 5th Street West
Lehigh Acres, FL 33971

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

3917 5th Street West
Lehigh Acres, FL 33971

D. 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)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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>	<u>Address</u>	<u>Type of Action</u>
Secretary	Patricia Jackreece	466 Leeward Circle Naples, FL 34104	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Secretary	Babafemi Ehindero	9712 Casa Linda Court Fort Myers, FL 33919	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Asst. Secretary	Peter Adeisgun	3417 Winkler Ave Ext Unit 603 FORT MYERS, FL 33916	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

[illegible]

The date of each amendment(s) adoption: 9-20-2009
(date of adoption is required)

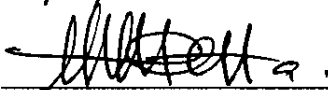
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 10/6/09

Signature 

(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)

Eze Wotocha
(Typed or printed name of person signing)

President
(Title of person signing)

.... officers and /or Directors continued

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Director	Gold Love	<u>2713 73rd St W</u> <u>Lehigh Acres, FL</u> <u>33971</u>	*Add
Director	Peter Ndungia	<u>4508 Varsity Lakes Ct</u> <u>Lehigh Acres FL 33971</u>	*Add
Director	Pamatarr Ndure	<u>10435 Caroling</u> <u>Willow Dr FT MYERS FL</u> <u>33913</u>	*Add
FINANCIAL SECRETAR	KOKOU VOSSAH	<u>3700 METRO PKW</u> <u>#1537 FT MYERS FL,</u> <u>33916:</u>	*CHANGE
DIRECTOR	Janet Julien	<u>803 Sea Urchin Cir</u> <u>FT MYERS, FL 33913</u>	*Add