## NO80000000973

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Amend

SECRETARY OF STATE OF STATE OF CORPORATIONS

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Mission (	Dutreach Interna	itional, Inc.
DOCUMENT NUMBER: NOS 0000	06973	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	•
Please return all correspondence concerning this m	atter to the following:	
Lillian E. (Name of C	Senior ontact Person)	<u>.                                    </u>
Mission Outreach (Firm/	International, I	<u>-</u>
609 SE Tann	er Avenue	
Port Saint Lucie, (City/ State	Florida 34984 and Zip Code)	<u> </u>
For further information concerning this matter, ple	ase call:	
Lillian E. Seni of (Name of Contact Person)	at (56) 2310-0 (Area Code & Daytime Tel	742 ephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Depart	ment of State:
\$35 Filing Fee \$\bigcup \$43.75 Filing Fee & Certificate of Status	S43.75 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	<del>)</del>

Tallahassee, FL 32301

المنافع
Articles of Amandment
to SECRETARY OF STATE  Articles of Incompany tion During the CORPORATIONS
Articles of IncorporationDIVISION OF CORPORATIONS  of
ng APR -6 PM 2: 28
Mission Outreach International, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
N08000006973 (Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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: Mission Outreach International, to
(Principal office address MUST BE A STREET ADDRESS) 609 SE Tanner Avenue
Port Saint Lucie, FL 34984
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX) Mission Dutrach International, Inc.
P.O. Box 8983
Port Saint Lucie, FL 34985
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: Lillian E. Senior
609 SE Tanner Avenue
New Registered Office Address: (Florida street address)
Port Saint Lucie , Florida 34984
(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.
Xillian 1. Demos
Signature of New Registered Agent, if changing

Page 1 of 3

## . '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>	Name	<u>Address</u>	Type of Action
YP/TR	Clifford Johnson	5297 SE Isabelita AV Stuart FL 34997	e.□ Add _ Remove
Dir	Chrestine Lopez	5097se Isabelita Ave. Stuart, FL 34997	
Dir	Raberto Rodriguez	428 SW S. Quick Circl Port St. Lucie, FL 34953	Add Remove
	ing or adding additional Articles, ent ditional sheets, if necessary). (Be spe		

. 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
Tre	Lillian E. Senior	Bit St. Luce, FL 34984	Add Remove
W	Garth A. Senior	bogse Tonner Ave. Port St. Lucie, FL 34984	Add Remove
$\overline{\mathcal{D}}$	Melissa Sweeney	bog se Tanner Ave. Port St. Lucie, FL 34984	Add Remove
	ng or adding additional Articles, enter of itional sheets, if necessary). (Be specific		
		<u> </u>	
4	-		

The date of each amendment(s) adoption:
Effective date if applicable: $22009$ (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.
Signature  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)
(Typed or printed name of person signing)
Officer - Administrator Treasurer (Title of person signing)

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