N08000008934

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



AL-RAHMAN AND GOODWILL CHARITY INC. (Name of Corporation as currently filed with the Florida Dept. of State) N08000008934

(Document Number of Corporation (if known)

| Pursuant to the provisions of section 617.1006, he following amendment(s) to its Articles of Inc. | | , this <i>Florida Not For Pro</i> | fit Corporation adopts |
|--|--------------------------|---|------------------------|
| ile following amendment(s) to its Africies of the | corporation. | | |
| A. If amending name, enter the new name of | the corporation | <u>n:</u> | |
| COMPASSION C | | | |
| The new name must be distinguishable and co abbreviation "Corp." or "Inc." <u>"Company" o</u> | | | porated" or the |
| B. <u>Enter new principal office address, if appl</u> Principal office address <u>MUST BE A STREE</u> | plicable: | 5903 BAMBOO DR | |
| | | ORLANDO FL 3280 | 7 |
| | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | | 5903 BAMOO DR | |
| | | ORLANDO FL 32807 | 7 |
| D. If amending the registered agent and/or renew registered agent and/or the new regis | | | r the name of the |
| Name of New Registered Agent: | WE CAN | CORPORATION | |
| | 7600 SOUTH | LAND BLVD - STE 100 | |
| New Registered Office Address: | (Florida street address) | | |
| | 0 | RLANDO | , Florida 32809 |
| • | 1 11 12 14 | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing thereby accept the appointment as registered position. | agera. I am | gent: familiar with and accept Clear Registered Agent, if chan | |
| | | | |

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> | Type of Action |
|--------------|--|---------------------------------------|-------------------|
| <u>VPD</u> | DAVID CASTRO | 444 MARROT STREET ORLANDO FL 32809 | □ Add ⊡ Remove |
| VPD | DAVID AUSTIN WARD | 5903 BAMOO DR ORLANDO FL 32807 | |
| N/A | N/A | N/A | |
| (attach | nding or adding additional Articles, en additional sheets, if necessary). (Be sp | | |
| N/A | | | |
| N/A | 4.00 | | |
| N/A | | | |
| N/A | | | |
| N/A | | and a section | |
| N/A | | | |

| The date of each amendmen | t(s) adoption: SEPTEMBER 30, 2009 |
|---|---|
| Effective date <u>if applicable</u> : | (date of adoption is required) |
| | (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 irectors. |
| Signaturo (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, other court appointed fiduciary by that fiduciary) |
| | OAZI S. RAHMAN (Typed or printed name of person signing) |
| | PRESIDENT - DIRECTOR (Title of person signing) |
| | (Title of person signing) |

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