# NO8000011381

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SECRETARY OF STATE

CCOULLIETTE

MAY 2 8 2009

EXAMINER

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	PORATION: IMPACT OUT	REACH MINISTRIE	ES INC
DOCUMENT NU	мвек: N08000011381	<b>***</b>	
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
	DEBI	PALMISANO	
	(Name o	f Contact Person)	
	IMPACT OUTRI	EACH MINISTRIES INC	3
	(Гіп	n/ Company)	
	PO E	OX 190595	
<del></del>	(	Address)	<del></del>
	LAUDER	RHILL FL 33319	
	(City/ Sta	te and Zip Code)	
	debi@	mylwcc.com of for future annual report n	atilization)
For further informa	tion concerning this matter, pleas	•	ouncation)
	non concerning and matter, proces	o ouii.	
DEBI PALMISA	NO	at ( 954 ) 485	5-3400
(Nam	ne of Contact Person)	(Area Code & I	5-3400 Daytime Telephone Number)
Enclosed is a check	for the following amount made p	payable to the Florida Depar	rtment of State:
•	☐ \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Sec	tion
Division of Corporations		Amenament Section Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive	
		Tallahassee, FL	32301

#### Articles of Amendment to Articles of Incorporation of

### **IMPACT OUTREACH MINISTRIES INC**

(Name of Corporation as currently filed with the Florida Dept. of State)

### N08000011381

(Document Nur	nber of Corporati	on (if known)	<del></del>	
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		this <i>Florida Not For F</i>	Profit Corporation a	dopts
A. If amending name, enter the new name o	f the corporation	n <u>:</u>		
GREATER IM	PACT MINIST	TRIES INC		
The new name must be distinguishable and c abbreviation "Corp." or "Inc." "Company" o			orporated" or the	
B. Enter new principal office address, if app				
(Principal office address <u>MUST BE A STREE</u>	TADDRESS)		SI	
			)9 M	
			# <u>#</u>	
C. Enter new mailing address, if applicable	<b>:</b>		26 SSE	Name of Street, or other Persons.
(Malling address MAY BE A POST OFFICE BOX)		++ <b>TU</b> -F1	<u> </u>	m
			ST ST	
			SIDE AT	
D. If amending the registered agent and/or new registered agent and/or the new regis			ter the name of the	
Name of New Registered Agent:	TONY	PALMISANO	<del></del>	
	5700 WEST 0	DAKLAND PARK BL	¥	
New Registered Office Address:	(Florid	da street address)		
	LAU	JDERHILL	_, Florida 33313	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing is the interest in the interest	ng Registered As d agent. I am f	zent: Tamiliar with and accep	ot the obligations o	f the
	Tom	Palmi	· · · · · · · · · · · · · · · · · · ·	

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
		***************************************	
			☐ Add ☐ Remove
E. If amend	ling or adding additional Articled ditional sheets, if necessary).	es, enter change(s) here: (Be specific)	
<u> </u>	117		
		· · · · · · · · · · · · · · · · · · ·	
			44-74-4-74-4-14-4-4-4-4-4-4-4-4-4-4-4-4-

The date of each amendmen	t(s) adoption: 05/22/2009		
Effective date <u>if applicable</u> :	05/22/2009		
	(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	re adopted by the members and the number of votes cast for the amendment(s) roval.		
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	5-22-09		
Signature	Tony Palm		
hav	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)		
	TONY PALMISANO		
	(Typed or printed name of person signing)		
	DIRECTOR		
	(Title of person signing)		

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