N09000005885

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
· (Bu	siness Entity Nar	ne)
, . · (Do	cument Number)	!
Certified Copies	Certificates	s of Status
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09 JUL 30 PHE: 12
SECRETARSEE FLORIG

Amend. 8-5-09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Restoration O	utreach	, Inc		
DOCUMENT NUMB	ER: N0900005885	 			
The enclosed Articles of	of Amendment and fee are sub	mitted for	filing.		
Please return all corresp	pondence concerning this matt	ter to the f	ollowing	:	
	 	hia C. D			
	(Name of	Contact P	erson)		
	Restoration (Firm	Compan	each	, Inc	
	2045 Whis	pering Ti	ails Blv	ď	
	(/	Address)			
	Winter Ha	aven. FL	33884		
	(City/ Star				
	ddavis@resto	oration-o	utreach	.org	
.,,	E-mail address: (to be use	d for futu	re annual	report notification	on)
For further information	concerning this matter, please	e call:			
Donishia C. Davis		at (_	863	877-8569	
(Name o	f Contact Person)		(Area (Code & Daytime	Telephone Number)
Enclosed is a check for	the following amount made p	ayable to	the Flori	da Department of	State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certif	3.75 Filir fied Copy tional co osed)	,	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	g Address			Address	··· »,
	ment Section			iment Section	
	n of Corporations ox 6327			on of Corporations Building	
	issee, FL 32314			Executive Center C	ircle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of	335	0 K	m
Restoration Outreach, Inc-	£2.	Ķ	O
(Name of Corporation as currently filed with the Florida Dept. of State)	35	5	
N0900005885			,

N0900005885		
(Document Number of Corpora	ation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute the following amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts	
A. If amending name, enter the new name of the corporati	on:	
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may n	d "corporation" or "incorporated" or the of the used in the name.	
B. Enter new principal office address, if applicable:	2045 Whispering Trails Blvd	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Winter Haven, FL 33884	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 4172	
	Winter Haven, FL 33885	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office agent.		
Name of New Registered Agent: Dor	nishia C. Davis	
	nispering Trails Blvd	
<u> </u>	rida street address)	
W	/inter Haven , Florida 33884 (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I amposition.	Agent: a familiar with and accept the obligations of the	

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> **VP** Andrew \ Greg Mar VΡ

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Andrew Williams	708 Sears Ave. NE	□ Add
		Winter Haven, FL 33881	☑ Remove
		Willie Haven, FL 55001	EZ remove
VP	Greg Marone	1345 Evalyn DR. SE	☑ Add
		Winter Haven, FL 33880	☐ Remove
		Willie Havelt, FL 55000	L Remove
S	Karen N. Steverson	3630 Great Masterpiece Rd	☐ Add
		LakeWales, FL 33898	☑ Remove
	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific		
Adding-#8 to	o Article V		
To provide e	arly childhood education programs	s which will prepare them for	obtaining a
quality educ	ation		
	,		
		•	
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<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
P	John Ruffin	4622 Crest View LN	Change to Chairman
S	Waymon Thomas	1677 Turnstone Way Clermont, FL 34711	ADD
	Gwendlyn Horne	505 Starter Dr. Winter Haven, FL 33880	Remove

The date of each amendment(s)	adoption: July 23, 2009
Effective date <u>if applicable</u> :	(date of adoption is required)
Effective date <u>it applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were awas/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or mem adopted by the board of directors	nbers entitled to vote on the amendment(s). The amendment(s) was/were ors.
have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
	Donishia C. Davis (Typed or printed name of person signing) Registered Agent
•	(Title of person signing)

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