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(Re	equestor's Name)	
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& COVER LETTER .

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: MENBER TSEHAY	MEDHANEALEM ETHIOPIAN ORTHODOX TEWAHEDO CHUR(
DOCUMENT NUMBER: N10000004170	<u> </u>	
The enclosed Articles of Amendment and fee are subr	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
TEDLA KIFLE		
	(Name of Contact Person)	
MENBER TSEIIAY MEDHANEALEM ETHIOPIA	N ORTHODOX TEWAHEDO CHURCH, INC	
	(Firm/ Company)	
17347 NW 61ST COURT		
	(Address)	
MIAMI, FL 33015		
	(City/ State and Zip Code)	
TKIFLEI@YAHOO.COM		
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please	call:	
TEDLA KIFLE	305 725-8812	
(Name of Contact Person		
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:	
\$35 Filing Fee See Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section	
Division of Corporations	Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

MENBERBER TSEHAY MEDHANEALEM ETHIOPIAN ORTHODOX TEWAHEDO CHURCH, INC

(Name of Corporation as cur	rently filed with the Flori	da Dept. of State)
N1000004170		
(Document No	umber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	1
N/A		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	ooration" or "incorporated	or the abbreviation "Corp." or The
3. Enter new principal office address, if applicable:	N/A	
Principal office address <u>MUST BE A STREET ADDRE</u>	<u> </u>	00 77 00 -0
		7
		्र ।
C. Enter new mailing address, if applicable:	N/A	RATE D
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		B-2
	 	
). If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered offi	ice address:	
Name of New Registered Agent: N/A		
	(Florida street address)	
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registe	ered Agent:	
hereby accept the appointment as registered agent. I ar		the obligations of the position.
	Signature of New Registe	ered 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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mi</u>	n <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	TEDLA KIFLE	17347 NW 61ST COURT
Add			MIAMI, FL 33015
Remove	050		-
2) Change	latera.	SINTAYEHU ESHETU	1535 NE 152ND STREET
Add			N MIAMI, FL 33162
Remove	VD	MELAWI DELETE	0.404 NW 6771 0772 FF77
3) x Change	<u>VP</u>	MELAKU BELETE	9491 NW 5TH STREET
Add			SUNRISE FL 33351
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
N/A			
	 -		
	4.4		

		December 17th, 2015	
	date of each amend		, if other than the
date	this document was s	gned.	
Effe	ective date <u>if applica</u>	December 17th, 2015	
		(no more than 90 days after amendment file date)	
		I in this block does not meet the applicable statutory filing requirements, this con the Department of State's records.	date will not be listed as the
Ado	ption of Amendmer	t(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	vas/were adopted by the members and the number of votes cast for the amend for approval.	ment(s)
	There are no member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was d of directors.	/were
	Dated _	December 17th, 2015	
	Signature_	Tæsla lyfte	
	Ì	by the chairman or vice chairman of the board, president or other officer-if dir ave not been selected, by an incorporator – if in the hands of a receiver, trusto ther court appointed fiduciary by that fiduciary)	
		Tedla Kifle TEDLA KIFIE	
		President President (Typed or printed name of person signing) (Title of person signing)	
		(Title of person signing)	