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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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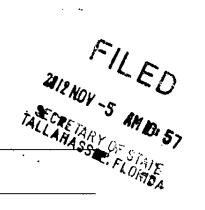
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 50 Days	of Fitness M	linistries, Inc
DOCUMENT NUMBER: N1000004	253	
The enclosed Articles of Amendment and fee are sub-	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Todd Lamphere		
	(Name of Contact Person	n)
Journey365, Inc.		
	(Firm/ Company)	
285 Uptown Blvd. Suite1	27	
	(Address)	
Altamonte Springs, Flori	da 32701	
	(City/ State and Zip Cod	e)
todd@jointhejour	•	
E-mail address: (to be used For further information concerning this matter, please	•	notification)
Todd Lamphere	_{at (} 407	491-0469
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton	Building
Tallahassee, FL 32314	2661 F	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



50 Days of Fitness Ministries, Inc

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

N10000004253

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617,1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following

lournou 265 Inc	tme of the corporati	<u>on:</u>		
Journey365, Inc.			_The	
name must be distinguishable and contain "Company" or "Co." may not be used in		tion" or "incorporated" or the abbreviation "Corp." (or "In	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		285 Uptown Blvd. Suite 127		
		Altamonte Springs		
		Florida 32701		
		285 Uptown Blvd. Suite 127		
		Altamonte Springs		
		Florida 32701		
		Tiorida ozroi		
new registered agent and/or the new		e address in Florida, enter the name of the	•	
	v registered office a	e address in Florida, enter the name of the ddress:	-	
new registered agent and/or the new	v registered office a	e address in Florida, enter the name of the	-	
<u>Name of New Registered Agent:</u>	285 Uptowi	n Blvd. Suite 127 (Florida street address)	•	
<u>Name of New Registered Agent:</u>	285 Uptowi	e address in Florida, enter the name of the ddress: n Blvd. Suite 127	-	

Page 1 of 4

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 A Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D	FIELDS, RICHARD E	900 North Street
Add			Longwood FL. 32750
X Remove			
2) Change	D	BALLOU, JEFF	900 North Street
Add			Longwood FL. 32750
X Remove	_	5.11.6 5.1.5	
3) Change	<u>D</u>	RAMSEUR, FRANK	900 North Street
Add			Longwood FL. 32750
X Remove			
4) Change	D	SUMNER, GREG	900 North Street
Add			Longwood FL. 32750
X Remove			
5) Change	D	Walls, Ed	285 Uptown Blvd. suite 127
X Add			Altamonte Springs, FL 32701
Remove			
6) Change	D	Lamphere, Patricia	285 Uptown Blvd. suite 127
X Add			Altamonte Springs, FL 32701
Remove			

attach additional sheets, if necessary).	(Be specific)	nge(s) here:		
		- .		
			-	
		_		
			·	

The da	te of each amendment(s) adoption: 11/1/2012	
Effect	ve date if applicable: 11/1/2012	
	(no more than 90 days after amendment file date)	
Adopt	on of Amendment(s) (<u>CHECK ONE</u>)	
	ne amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) as/were sufficient for approval.	
	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.	
	Dated 11/1/2012 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)	
	Todd Lamphere	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	