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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: AGAPE HOUSE TLF, INC			
DOCUMENT NUMBER - NI 1000001274			
DOCUMENT NUMBER: N11000001374			
The enclosed Articles of Amendment and fee are sub-	bmitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
	RONALD POTTS		
(Na	me of Contact Person)		
AGA	APE HOUSE TLF, INC		
	(Firm/ Company)		
94	44 15th Avenue South		
	(Address)		
Saint	Datarahura Elarida 22705		
	Petersburg, Florida 33705 y/ State and Zip Code)		
(Cit)	y state and dip code)		
wright E-mail address; (to be use	tjavontae@yahoo.com id for future annual report notification)		
For further information concerning this matter, pleas	•		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Ronald Potts	at (727) 492-0542		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount made p	payable to the Florida Department of State:		
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)		
Mailing Address	Street Address		
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations		
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

AGAPE HOUSE TLF, INC

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

THE STATE OF THE S	0001374		
(Document Number of Corpor	ation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statut following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i> .	Profit Corpoi	ation adopts the
A. If amending name, enter the new name of the corporat	<u>ion:</u>		
N/A			
The new name must be distinguishable and contain the word "Corp." or "Inc." <u>"Company" or "Co." may not be used in</u>		porated" or ti	ie abbreviation
B. Enter new principal office address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	514 KINGSTON STRI	EET SOUTH	
	SAINT PETERSBURG	3. FL 33711	
		<u>, , , , , , , , , , , , , , , , , , , </u>	
D. If amending the registered agent and/or registered offi	oo address in Florida, ee	ntar tha nam	a of the
new registered agent and/or the new registered office a		nter the nam	<u>t or the</u>
Name of New Registered Agent: JAVO	ONTAE L. WRIGHT		
944	15th Avenue South		
	(Florida street uddress)		
New Registered Office Address:			
Saint I	Petersburg	. Florida	33705
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered [hereby accept the appointment as registered agent. \ 1 am fa.		a ablic h tana	of the position
nereby accept the appointment as registered agent. If am fall		e foligiations	oj ine position.
1 Jammin	L, VUM		
(Signature of New Regis	tered Agent, if changing	J	

Page 1 of 4

.If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet.)

	<u>Name</u>		Address
Javontae L. Wright			944 15th Avenue South
			St. Petersburg, FL 33705
Erii	n Porter		944 15th Avenue South
			St. Petersburg, Fl. 33705
Ch	nulon A. Marriot		
Cna	irles A. Myrick		944 15th Avenue South St. Petersburg, FL 33705
Roi	n Potts		944 15th Avenue South
			St. Petersburg, FL 33705
Sid	nev Gant		944 15th Avenue South
5.0	, Guii.		St. Petersburg, FL 33705
NG an officer an	d/or director, please l	ist the title(s) and	l name of the officer/director to be removed:
<u>Name</u>		Title(s)	<u>Name</u>
		4)	
		5)	
		6)	
	Cha Ron Sid	Javontae L. Wright Erin Porter Charles A. Myrick Ron Potts Sidney Gant	Davontae L. Wright Erin Porter

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)				
N/A					
		**			
			A	***	
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* ** *** ** *** ** *** *** *** *** ***		· · · · · · · · · · · · · · · · · · ·		 	<u> </u>
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			·		

The date of each amendment(s) adoption: NOVEMBER 14, 2011
Effective date if applicable: NOVEMBER 14, 2011 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated NOVEMBER 14, 2011. Signature NOVEMBER 14, 2011.
(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)
JAVONTAE L. WRIGHT
(Typed or printed name of person signing)
PRESIDENT/CEO
(Title of person signing)

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