N/10000 8874

(Requ	estor's Name)
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Na	ime)
(Docu	ment Number)
Certified Copies	Certificate	es of Status
Special Instructions to Fili	ng Officer:	

Office Use Only



400221166814

02/23/12--01012--021 **43.75

American de la companya de la compan

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section

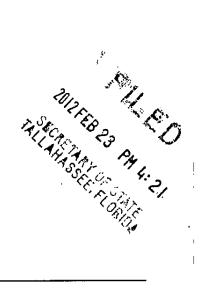
Division of Corporations THE TRUTH OUTREACH PROJECT, INC NAME OF CORPORATION The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KHADINE ALSTON (Name of Contact Person) THE TRUTH OUTREACH PROJECT, INC (Firm/ Company) 5200 N. FEDERAL HIGHWAY SUITE 2, PMB 1108 (Address) FORT LAUDERDALE FL 33308 (City/ State and Zip Code) khadinea@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KHADINE ALSTON (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed)

Mailing Address

Amendment Section-**Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

'Street'Address

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



Articles of Amendment Articles of Incorporation

THE TRUTH OUTREACH	PROJECT, INC	
(Name of Corporation as currently f		State)
N11000008874		
(Document N	umber of Corporation (if know	1)
Pursuant to the provisions of section 617.100 amendment(s) to its Articles of Incorporation		Not For Profit Corporation adopts the follow
A. If amending name, enter the new name	of the corporation;	
		The 1
name must be distinguishable and contain th "Company" or "Co," may not be used in the		rpörated" or the abbreviation "Corp." or "In
		
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicab	ile:	
(Mailing address <u>MAY BE A POST OF</u>		
B. 76		The state of the same of the
D. If amending the registered agent and/o new registered agent and/or the new re	r registered office address in begistered office address:	torma, enter the name of the
Name of New Registered Agent:		
	(Florida street ad	dress)
New Registered Office Address:		
	(O)	, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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, 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; CEC Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of eacheld. 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
·X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u> .		<u>Addres</u> s
1) Change Add Remove			······································	
2) Change Add Remove				
3) Change Add Remove				
4) Change Add Remove	•	·		
5) Change Add Remove	•			
6) Change Add Remove		1		

RTICLE III - PURPOSE; To promote wellness, inclu	ding but not limited to health	s, through education, aware	ness, prevention and to be	a source of support/advocacy	to communitie
		·····			
					_
,					
			-		,
			· · · · · · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·			
				·	
					
•					
					
•					
		····			
					··
			<u> </u>		

The date of each amendment(s) adoption: $1/2/12$	
Effective date if applicable: 1/2/12	
(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 2/17/12 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)	
Khadine Alston (Typed or printed name of person signing)	
President (Title of person signing)	

4 1 7 4