M11000009101

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number) Certificates	of Status
Special Instructions to	Filing Officer	
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COVER LETTER

TO: Amendment Section
Division of Corporations

APM New Beginnings Community Outreach, Inc. N11000009101 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Dr. John Bliss (Name of Contact Person) APM New Beginnings Community Outreach, Inc. (Firm/ Company) 13914 Vista Del Lago (Address) Clermont, FL 34711 (City/ State and Zip Code) evangelsaint7@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Robert Costa, Jr., CPA (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



APM New Beginnings Comm	
(Name of Corporation as currently filed with the l	Florida Dept. of State)
N11000009101	
(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	The new pration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRES	<u>v</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent: N/A	
New Registered Office Address:	(Florida street address)
N/A	. Florida
(Cit	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
Signature of New Reg	zistered Agent, if changing

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 <math>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> !	lohn Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add 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)
	See Statement Attached
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_	
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STATEMENT ATTACHED TO THE ARTICLES OF INCORPORATION OF APM NEW BEGINNINGS COMMUNITY OUTREACH, INC

Said organization is organized exclusively for charitable, religious, educational, and/or scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by a court of competent jurisdiction in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.

The date of each amendment(s) adoption: November 21, 2012						
	Effective date if applicable: N/A					
	(no more than 90 days after amendment file date)					
Ado	option 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 11/22/2012					
	Signature Donald & Bliss					
	(By the chairman or rice 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)					
	DR. John F. Bliss					
	(Typed or printed name of person signing)					
	CEO - President					
	(Title of person signing)					