

N12000000737

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**

Division of Corporations  
Fax Number : (850) 617-6380

**From:**

Account Name : MACFARLANE FERGUSON & MCMULLEN (CLEARWATER)  
Account Number : 071005001001  
Phone : (727) 441-8966  
Fax Number : (727) 442-8470

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: ecm@macfar.com

**COR AMND/RESTATE/CORRECT OR O/D DESIGN  
CATHOLICS FOR TANZANIA, INC.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1       |
| Certified Copy        | 0       |
| Page Count            | 05      |
| Estimated Charge      | \$43.75 |

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01-26-12 Attend.



January 26, 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CATHOLICS FOR TANZANIA, INC.  
2121 16TH AVENUE SOUTHWEST  
LARGO, FL 33770

SUBJECT: CATHOLICS FOR TANZANIA, INC.  
REF: N12000000737

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell  
Regulatory Specialist II

FAX Aud. #: E12000021062  
Letter Number: 112A00002138

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TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: **CATHOLICS FOR TANZANIA, INC.**

DOCUMENT NUMBER: **N12000000737**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**EMIL C. MARQUARDT, JR.**

(Name of Contact Person)

**MACFARLANE FERGUSON & MCMULLEN**

(Firm/ Company)

**625 COURT ST., STE. 200**

(Address)

**CLEARWATER, FL 33756**

(City/ State and Zip Code)

**ecm@macfar.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Emil C. Marquardt, Jr.**

(Name of Contact Person)

at **727 444-1402**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

|  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & | <input type="checkbox"/> \$43.75 Filing Fee & | <input type="checkbox"/> \$52.50 Filing Fee |
| Certificate of Status                    | Certified Copy   | Certificate of Status                         | Certified Copy                              |
|  | (Additional copy is enclosed)                            | (Additional Copy is 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

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Articles of Amendment  
to  
Articles of Incorporation  
of

**CATHOLICS FOR TANZANIA, INC.**

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

**N12000000737**

(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 amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

**CATHOLIC ARCHDIOCESE OF MWANZA, INC.**

The new

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City)

Florida

(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

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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:

☒ Change      PT      John Doe  
☒ Remove      V      Mike Jones  
☒ Add      SV      Sally Smith

| Type of Action<br>(Check One)  | Title             | Name                       | Address   |
|--|-------------------|----------------------------|---|
| 1) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>PD</u>         | <u>REV. CLAUDIUS MPUYA</u> | <u>St. Patrick Catholic Church</u><br><u>2121 16th Avenue SW</u><br><u>Largo, FL 33770</u>  |
| 2) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>STD</u>        | <u>REV. CALLIST NYAMBO</u> | <u>All Saints Catholic Church</u><br><u>2801 Curlew Road</u><br><u>Clearwater, FL 33761</u> |
| 3) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>D</u>          | <u>FRANK MURPHY</u>        | <u>623 Poinsettia Road</u><br><u>Belleair, FL 33756</u>                                     |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>          </u> | <u>          </u>          | <u>          </u><br><u>          </u><br><u>          </u>                                 |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>          </u> | <u>          </u>          | <u>          </u><br><u>          </u><br><u>          </u>                                 |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>          </u> | <u>          </u>          | <u>          </u><br><u>          </u><br><u>          </u>                                 |

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The date of each amendment(s) adoption: 1/23/12

Effective date, if applicable: \_\_\_\_\_  
(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: 01/25/2012

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)

REVEREND CLAUDIUS MPUYA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)