N12000003014

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	1





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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: A Tree of	Life Fellow	ship INC
DOCUMENT NUMBER: N1200003	014	
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Tony Ervin		
	Name of Contact Person	1)
A Tree of Life Fellowship	INC	
	(Firm/ Company)	
1667 Scrub Jay Rd		
	(Address)	
Apopka/FL 32703		
	City/ State and Zip Code	e)
ATreeofLifeFellow	ship@gma	il.com
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please c	all:	
LaSherrie Ervin	_{at (} 713	5826530
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depa	rtment of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address		Address
Amendment Section Division of Corporations		ment Section
P.O. Box 6327		n of Corporations Building
Tallahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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		of	Tild Tild Tild Tild Tild Tild Tild Tild
A Tree of Life Fellowship	INC		
(Name of Corporation as current	ly filed with the Flo	orida Dept. of State)	-
N12000003014			
(Documen	t Number of Corpor	ation (if known)	
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporat		es, this <i>Florida Not For Profit Corpora</i>	tion adopts the following
A. If amending name, enter the new na	me of the corporat	ion:	
			The new
name must be distinguishable and contain "Company" or "Co." may not be used in		tion" or "incorporated" or the abbrevi	ation "Corp." or "Inc."
B. Enter new principal office address,		1667 Scrub Jay Rd	
(Principal office address MUST BE A ST		Apopka FL 32703	
C. Fatana and Was allows Manager		······································	
C. Enter new mailing address, if applie (Mailing address MAY BE A POST (1667 Scrub Jay Rd	
		Apopka FL 32703	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and new registered agent and/or the new			of the
Name of New Registered Agent:			
	1667 Scrub	Jay Rd	
New Registered Office Address:		(Florida street address)	
	Apopka	Florida 3	2703
	(City)	(Zip Cod	le)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			f the position.

Signature of New Registered 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 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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		<u></u>		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
				· · · · · · · · · · · · · · · · · · ·
Remove				
6) Change		_		<u>, , , , , , , , , , , , , , , , , , , </u>
Add				
Remove				
				W-1-1

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

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 the Court of Common Pleas of
the county 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: 8 April 2013
Effective date if applicable: 8 April 2013
(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 8 April 2013
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)
Tony Ervin
(Typed or printed name of person signing)
Director
(Title of person signing)