n1200004262

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	ne #)
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COVER LETTER

TO: Amendment Section Division of Corporations

•		
NAME OF CORPORATION: Trinity OL	itreach of Ta	ampa Bay, Inc.
DOCUMENT NUMBER: N12000004	262	
The enclosed Articles of Amendment and fee are subr	mitted for filling.	
Please return all correspondence concerning this matte	er to the following:	
Beverley Latibeaudiere		
	(Name of Contact Person	n)
Trinity Outreach of Tamp	oa Bay, Inc.	
•	(Firm/ Company)	
5247 6th Street		
	(Address)	
Zephryhills, FL 33542		
	(City/ State and Zip Code	e)
blati@trinityoutrea		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Beverley Latibeaudiere	877	333-1845
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	urtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

Trinity Outreach of Tampa Bay, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)	_
N1200004262	
(Document Number of Corporation (if known)	_
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the amendment(s) to its Articles of Incorporation:	e following
A. If amending name, enter the new name of the corporation:	
	_The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." "Company" or "Co." may not be used in the name.	or "Inc."
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u> </u>
	833 833
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9-6
(muting address MAT BEAT OST OFFICE BOA)	- <u>°</u> 5
	HARREN
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:	
, Florida	
(City) (Zip Code	r)
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, 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>V</u> <u>Mik</u>	n <u>Doe</u> e Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Treasurer	Karen Treadway	17609 Esprit Drive
Add			Tampa, FL 33647
X Remove			
2) Change	Treasurer	Janet Cordero	7646 Brookline Street
X_{Add}			Wesley Chapel, FL 33544
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add		•	
Remove			

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date this document was signed		, ii odiei dian di
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) oproval.	
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	20/2/a014	
(By the	chairman or vive chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	_
	Reped or printed name of person signing)	
	VI CE CHAIRMAN (Title of person signing)	