

N1200000 4539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

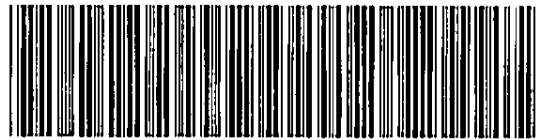
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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R. WHITE

FEB 14 2020

2020-13 PM 12:43

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: INSPIRATIONAL FAITH OUTREACH INC.

DOCUMENT NUMBER: N12000004539

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

Please return all correspondence concerning this matter to the following:

WALTER HORN

(Name of Contact Person)

(Firm/ Company)

12020 SW 268TH ST UNIT 64

(Address)

HOMESTEAD, FL 33032

(City/ State and Zip Code)

walterhorn99@yahoo.com

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

For further information concerning this matter, please call:

WALTER HORN

786

518-6853

at

(Name of Contact Person)

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2020

WALTER HORN
12020 SW 268TH ST UNIT 64
HOMESTEAD, FL 33032

SUBJECT: INSPIRATIONAL FAITH OUTREACH INC.
Ref. Number: N12000004539

We have received your document for INSPIRATIONAL FAITH OUTREACH INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

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) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 120A00002516

2020 FEB 13 AM 11:48

RECEIVED

Articles of Amendment
to
Articles of Incorporation
of

INSPIRATIONAL FAITH OUTREACH INC.

2020 FEB 13 PM 12:48

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

N12000004539

(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:

LIGHTHOUSE FOR JESUS 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)

1541 S.E. 12TH AVE. UNIT 24-25

HOMESTEAD, FL 33034

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12020 SW 268TH ST UNIT B 64

HOMESTEAD, FL 33032

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: N/A

New Registered Office Address:

N/A

(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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>DEACON</u>	<u>EAGLESE ANDERSON JR</u>	<u>1548 N.E. 8TH ST #204</u> <u>HOMESTEAD, FL 33033</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>DEACON</u>	<u>HENRY ALEXANDER HORN</u>	<u>1560 BLUEBIRD LN.</u> <u>HOMESTEAD, FL 33035</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>MOTHER</u>	<u>SARAH WALLS</u>	<u>946 N. DAVIS PARKWAY</u> <u>FLORIDA CITY, FL 33034</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>OFFICER</u>	<u>DELPHINIA FERGUSON</u>	<u>795 S.W. 13TH ST</u> <u>FLORIDA CITY, FL 33034</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

Page 2 of 4

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

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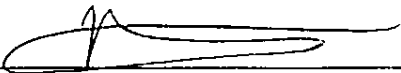
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- This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

☒ 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 12/30/2019

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)

WALTER HORN
(Typed or printed name of person signing)

PASTOR
(Title of person signing)