## N12000005313

(R	equestor's Name)	
· (A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	<i>+</i> )
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	····
Certified Copies	Certificates	s of Status
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Amend Cus 10 3/14

## **COVER LETTER**

O: Amendment Section Division of Corporations
IAME OF CORPORATION: HARVEST COMMUNITY OUTREACH, IN
OCUMENT NUMBER: N 1200005313
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
TARA T. POGUE
(Name of Contact Person)
(Firm/ Company)
3202 SAMANTHA DR.
(Address)
CANTONMENT FL 32533 (City/ State and Zip Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
TARA T. POGYC at (850) 525-1904 (Name of Contact Person) (Area Code & Daytime Telephone Number)
nclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is Enclosed)  S52.50 Filing Fee Certified Copy (Additional Copy is Enclosed)
Mailing Address  Amendment Section  Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed	OUTRE with the Flo	PACH INC, orida Dept. of State)	<del></del>
		N120005313	
(Document)	Number of C	orporation (if known)	
Pursuant to the provisions of section 617.1006, F amendment(s) to its Articles of Incorporation:	Florida Statute	es, this Florida Not For Profit Corporation adopts	the following
A. If amending name, enter the new name of t	the corporat	tion:	
NIA	4		The new
		ttion" or "incorporated" or the abbreviation "Corp	o." or "Inc."
"Company" or "Co." may not be used in the na	<u>ime</u> .	<u>.</u>	
B. Enter new principal office address, if appli	icable:	3990 MARKET ST.	
(Principal office address <u>MUST BE A STREET</u>	<u> </u>	3990 MARKET ST. PENGACOLA FL. 32505	
		<u> </u>	
			<del></del>
C. Enter new mailing address, if applicable:		NA	
(Mailing address MAY BE A POST OFFIC	E BOX)	~/4	
D. If amending the registered agent and/or re new registered agent and/or the new regist			
		d// a	
Name of New Registered Agent:		N/A	
		(Florida street address)	
New Registered Office Address:		Pioriaa street address)	
		, Florida	
	(City)		ode)
Now Designated Amenda Company of showing	a Desistant		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		i Ageitt: imiliar with and accept the obligations of the positi	on.
	·		
Sign	ature 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	PT         John I           V         Mike           SV         Sally	<u>Jones</u>		
Type of Action (Check One)	Title	Name		<u>Addres</u> s
1) Change			<del>1</del>	
Remove				
2) Change		MA		<u>, , , , , , , , , , , , , , , , , , , </u>
Remove				
3)Change		N/A		
Add Remove				
4) Change		<u> </u>		
Remove				
5) Change		NA		
Add				
Remove				
6) Change		<u> </u>	····	
Add				
Remove			Page 2 of 4	

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

AMENDMENT TO ARTICLE IIL IS AS FOLLOWS:
THE PURPOSE SHALL BE FOR RELIGIOUS CHARITABLE EDUCATIONAL
SCIENTIFIC AND LITERARY UNDER SECTION 501(C) 3
OF THE INTERNAL REVENUE CODE OF 1986 OR THE
CORRESPONDING PROVISIONS OF ANY FUTURE UNITED STATES
INTERNAL REVENUE LAW, UPON THE dissolution OF
THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE
OR MORE EXEMPT PURPOSES WITHIN THE MEANING OF
SECTION 501 (E) 3 OF THE INTERNAL REVENUE CODE, OR
COPRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR
SHALL BE dISTRIBUTED TO THE FEDERAL GOVERNMENT, OR
TO A STATE OR LOCAL GOVERNMENT, FOR APUBLIC
PURPOSE. ANY SUCH ASSETS NOT disposed OF SHALL be
disposed of by THE COURT OF COMMON PLEAS OF THE
COUNTRY IN WHICH THE PRINCIPAL OFFICE OF THE
DEGANIZATION IS THEN LOCATES, EXCLUSIVELY FOR SUCH
PURPOSES OR TO SUCH ODGANIZATION OR ORGANIZATIONS, AS
SAID COURT SHALL DETERMINE, WHICH ARE ORGANIZED
AND OPERATED EXCLUSIVELY FOR SUCH PURPOSES.

The date of each amendment(s) ado date this document was signed.	ption: 2-25-/4	, if other than the
Effective date <u>if applicable</u> :	againthing response	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated 25	25-14	
(By the chairm	nan or vice chairman of the board, president or other officer-if directors	
	n selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
	Typed or printed name of person signing)	
	President (Title of person signing)	