## N12000005990

(Re	equestor's Name)	
(A	ddress)	
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(0)	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nar	ne)
(D	ocument Number)	<del></del>
Certified Copies	Certificates	s of Status
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	·	

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DIVISION OF CORPORATION

Amend (cc) 10 2/1/3

## COVER LETTER

TO: Amendment Section

Division of Corp	orations *		
NAME OF CODPO	RATION: Caleb's Mis	sion, Inc	
(AME OF CORTO	BER: N1200000599	n	
DOCUMENT NUM	BER: 14120000000		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
•	Kenneth Winter		
		Name of Contact Person	
	Caleb's Mission, I	nc	
		Firm/ Company	
	14831 Celestial V	Vay	
		Address	
	Dover, Florida 33	527	
		City/ State and Zip Code	
olo	lmanwintar0@men	o com	
OIC	Imanwinter9@msn	ed for future annual report r	notification)
	E-man address. (to be as	ou for future unique repose i	
For further information	on concerning this matter, pleas	se call:	
Kenneth Wir	nter	a <sub>t</sub> (813	716-0345
Name	of Contact Person	Area Cod	le & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depar	rtment 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)
M	ailing Address	Street A	Address
Ān	nendment Section	Amend	ment Section
Division of Corporations			n of Corporations
P.O. Box 6327			Building vecutive Center Circle

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 24, 2013

KENNETH WINTER CALEB'S MISSION, INC. 14831 CELESTIAL WAY DOVER, FL 33527

SUBJECT: CALEB'S MISSION, INC.

Ref. Number: N12000005990

We have received your document for CALEB'S MISSION, 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):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 013A00001844

13 REB -7 AN 7: 33

14 REB -7 AN 7: 33

15 REB -7 AN 7: 33

16 REB -7 AN 7: 33

## Articles of Amendment to Articles of Incorporation

	of		
<u> Careb &gt; 1</u>	Mission, Inc.	<del>' </del>	
(Name of Corporation as currently fi		2)	
V 1200000 59	umber of Corporation (if known)		<del>_</del>
Pursuant to the provisions of section 617.1000-amendment(s) to its Articles of Incorporation		For Profit Corporation adopts the	he following
A. If amending name, enter the new name	of the corporation:		•
			The new
name must be distinguishable and contain the "Company" or "Co." may not be used in the	e word "corporation" or "incorpora <u>e name</u> .	ated" or the abbreviation "Corp.	" or "Inc."
B. Enter new principal office address, if a			
(Principal office address MUST BE A STRE	<u>GET ADDRESS</u> )		
	1 1		<del>_</del>
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)	<u>lle:</u> FICE BOX)		
			<u> -</u> 2000
			- STOR
			- 6 4
D. If amending the registered agent and/or new registered agent and/or the new re		da, enter the name of the	<u> </u>
new registered agent and/or the new re	min Ma, never and desire		3 90
Name of New Registered Agent:			ci i
			1 P
New Registered Office Address:	(Florida street address,	)	
	i i	, Florida	
<del>-</del>	(City)	(Zip Code)	<del></del>
New Registered Agent's Signature, if chan	ging Registered Agent:		
I hereby accept the appointment as registered		ept the obligations of the positio	n.
	i la sa		
Signat	ure of New Registered Agent, if char	nging	

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 <math>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: <u>X</u> Change	PT John	Doe	
X Remove	Y <u>Mike</u>	<u> Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change	STD	Josiah Winter	14819 Celestial Way
Add Remove			Dover, Florida 33527
2) Change	D	Isaiah Winter	14831 Celestial Way
Add			Dover, Florida 33527
3) Change	STD	Daniel Escobar	1851 Kim Acres Ln.
Add Remove			Dover, Florida 33527
4) Change	D	Dominic Facarrotta	2205 Delightful Dr.
Add Remove			Ruskin, Florida 33570
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)	
		<del></del>
		**************************************
		<del></del>
an amendment provides for an exch	hange, reclassification, or cancellation of issued shandment if not contained in the amendment itself.	ares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued sha endment if not contained in the amendment itself:	ares,
an amendment provides for an exchaprovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued sheadment if not contained in the amendment itself:	ares,
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shendment if not contained in the amendment itself:	ares.

The date of each amendment(s) adoption:		
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 was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
There are no members or members e adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated	0/13 13 A/4 tr	
(By the charman have not been sel	or vice chairman of the board, president or other officer-if directors lected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
<u> Kenv</u>	neth Wither  ped or printed name of person signing)	
Pre	Sident tle of person signing)	
(11)	tte of person signing)	

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