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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section **Division of Corporations**

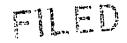
Church of the Oper	Door of Orlando, Inc	•	
N12000007704 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are suit	bmitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Dr. Wilfredo T. Laboy, Pastor			
	(Name of Contact Pe	erson)	
New Life Outreach International Church, Florida			
	(Firm/ Company	y)	
10519 Penelope Place, Unit #104	<i>;</i>		
	(Address)	· · · · · · · · · · · · · · · · · · ·	
New Port Richey, Florida 34654			
	(City/ State and Zip	Code)	
prilaboy@aol.com .			
E-mail address: (to be use	ed for future annual re	port notification)
For further information concerning this matter, pleas	se call:		
Dr. Wilfredo T. Laboy	at	978	241-0484 (Mobile)
(Name of Contact Perso		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	Department of	State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status		Certifi is Certif	O Filing Fee scate of Status sed Copy stional Copy is seed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Church of the Open Door of Orlando, Inc.			15 DEC 11 PM 4: 40	
(Name of Corporation	as current	ly filed with the Florida	Dept. of State)	
N12000007704			Dept. of State) SECRETARY OF STATE TALLAHASSEE, FLORIC	
(Docum	nent Numbe	er of Corporation (if known	m)	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statute:	s, this <i>Florida Not For Pre</i>	rofit Corporation adopts the following	
4. If amending name, enter the new name of the	<u>corporați</u>	on:		
New Life Outreach International Church of Florida	ı, Inc.		The nev	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated" or		
R. Enter new principal office address if applica	hle	10519 Penelope Place, Un	nit #104	
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u>)		New Port Richey, Florida		
		34654		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		New Life Outreach International Church of Florida, Inc.		
		PO Box 6060		
		Hudson, Florida 34674		
D. If amending the registered agent and/or regis			er the name of the	
new registered agent and/or the new register	ed office a	ddress:		
Name of New Registered Agent:	Dr. Wilfre	do T. Laboy		
	10519 Per	nelope Place, Unit #104		
New Registered Office Address:		(Florida	a street address)	
	New Port	Richey,	34654	
	-	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing I	Registered	Agent:		
I hereby accept the appointment as registered agen	nt. I am far	miliar with and decorpt the	obligations of the position.	
-	- V	gnature of New Registered	d 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.

X Change X Remove X Add	<u>V Mik</u>	n Doe se Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Tre.	Luis Jimenez	524 Sherburn Ct.
Add			Orlando, Florida
X Remove			32828
2) X Change	VP	Margarita Laboy	10519 Penelope Place, Unit #104
Add			New Port Richey, Florida
Remove			34654
3) X Change	Sec.	Michelle L. Munoz	10519 Penelope Place, Unit #203
Add		,	New Port Richey, Florida
Remove			34654
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove		D 2 -64	

E. If amending or adding additional An (attach additional sheets, if necessary)	rticles, enter change(s) here: . (Be specific)			
NON-APPLICABLE				
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		December 2, 2015	
	e date of each amendment(s) adoption: this document was signed.		, if other than the
	N/A		
Em	ective date <u>if applicable</u> :	o more than 90 days after amendment file date)	···
	e: If the date inserted in this block does ument's effective date on the Department	not meet the applicable statutory filing requirements, this date will not tof State's records.	be listed as the
Add	option of Amendment(s)	CHECK ONE)	
	The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	
	There are no members or members entit adopted by the board of directors.	tled to vote on the amendment(s). The amendment(s) was/were	
	have not been select	vice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)	_
	Dr. Wilfredo T. I	Laboy	
		(Typed or printed name of person signing)	
	President		
	·····	(Title of person signing)	