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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	NEW VISION CHRIS	TIAN EMPOWER	RMENT COMN	MUNITY CENTER, INC.
NI DOCUMENT NUMBER:	2000008077			
The enclosed Articles of Amen	dment and fee are submi	tted for tiling.		•
Please return all correspondenc	e concerning this matter	to the following:		
Cecile Marie T. Lacroix				
	()	Name of Contact P	erson)	·
NEW VISION CHRISTIAN E	MPOWERMENT COM	MUNITY CENTE	R. INC.	
		(Firm/ Compan	y)	
4261 NW 36th Way				
•		(Address)	•••	
Fort Lauderdale, FL 33309				
-	((City/ State and Zip	Code)	
E-m	ail address: (to be used for	or future annual rep	port notification)
For further information concern	ing this matter, please ca	dl:		
Cecile Marie T. Lacroix		at	954	588-1013
(N	ime of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the follo	owing amount made paya	ble to the Florida I	Department of :	State:
■ \$35 Filing Fee □		\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	O Filing Fee scate of Status led Copy ional Copy is sed)
Mailing Address		Sti	reet Address	

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

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

Articles of Amendment to Articles of Incorporation of

NEW VISION CHRISTIAN EMPOWERMENT COMMUNITY CENTER, INC.

(Name of Corporation as	currentl	v filed wit	h the Florida	Dept. of State)		_
N12000008077							
(Documen	it Number	of Corpor	ation (if know	m)			_
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes,	this <i>Florid</i>	da Not For P.	rofit Corporatio	m adopts th	ie followii	ກຍ
A. If amending name, enter the new name of the co	prporatio	<u>n:</u>					
JOSEPH G. LACROIX FOUNDATION, INC.						The ne	
name must be distinguishable and contain the word "c "Company" or "Co," may not be used in the name.	corporatio	m" or "inc	corporated" c	or the abbreviati	ion "Corp."		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		-					_
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO.</u>	- <u>X</u>) -				SECRE	2018 JUN 1	- T
D. If amending the registered agent and/or register new registered agent and/or the new registered	ed office office add	address ir dress:	ı Florida, ent	er the name of	SSEE, FLORIO	8 PH 3: 10	, _ _
<u>Name of New Registered Agent:</u>					D		_
New Registered Office Address:			(Florid	a street address)			_
				Flor	rida		
		(City)			(ip Code)		_
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered A I am fami	gent: liar with a	nd accept the	obligations of t	he position		
	Sigi	nature of N	ew Registeree	l Agent, if chan	ging		_

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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	_	-		
Add				
Remove				
2) Change		_		<u> </u>
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_	- 	
Add				<u> </u>
Remove				
o) Change		_		
Add		_		-
Remove			•	

If amending or adding additional Artach additional sheets, if necessary).	(Be specific)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amewas/were sufficient for approval.	endment(s)
■ There are no members or members entitled to vote on the amendment(s). The amendment(s) wadopted by the board of directors.	vas/were
Dated 6/14/18	
Signature Cocile Clarie Liseron	
(By the chairman or vice chairman of the board, president or other officer-if have not been selected, by an incorporator – if in the hands of a receiver, troother court appointed fiduciary by that fiduciary)	`directors ustee, or
Cecile Marie T. Lacroix	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	