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COVER LETTER

TO: Amendment Section
Division of Corporations

YOUTH AND COM NAME OF CORPORATION:	MMUNTIY OUTREA	ACH INC	
N12000008679			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
HELMI EL AGHA			
	(Name of Contact P	erson)	
YOUTH AND COMMUNITY OUTREACH INC.			
	(Firm/ Compan	y)	
4990 W. IRLO BRONSON HWY			
	(Address)		
KISSIMMEE, FL 34746			
	(City/ State and Zip	Code)	<u> </u>
baig@hwcpafl.com			
E-mail address: (to be use	d for future annual re	port notification	1)
For further information concerning this matter, please	call:		
Hasan A. Baig, CPA	a	407 t	270-7330
(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida	Department of :	State:
\$35 Filing Fee		Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section		reet Address	ion

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

YOUTH AND COMMUNITY OUTREACH INC

(Name of Corporation as o	currently filed with the Fl	orida Dept. of State)	
N12000008679			
(Document	Number of Corporation (if	known)	
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not I</i>	For Profit Corporation adopts the fol	lowing
A. If amending name, enter the new name of the cor	poration:		
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorpora		ie new 'Inc.''
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDI</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u></u>		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of New Registered Agent:		a, enter the name of the	
New Registered Office Address:		Florida street address)	
New Registered Vyface Statistiss.	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		ot the obligations of the position.	
	Signature of New Reg	istered Agent, if changing	
	Page 1 of 4	NOV - 5	
			i d

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	$\underline{V} = \underline{Mik}$	n Doe ge Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	GEORGE PARRIS	225 Katherine Dr
Add			Jefferson, GA 30549
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			····
Add		·	
Remove			

f amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
-	
-	
	
	·

10/01/2018	
The date of each amendment(s) adoption:	, if other than the
uate this doctaneat was signed.	
Effective date if applicable:	<u> </u>
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	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 amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
10/01/2018 Dated	
1. Dut	
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)	
WAFAA ALKHATEEB	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	