N1200000 8679

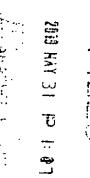
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TO: Amendment Section Division of Corporations

YONAME OF CORPORATION: $\underline{\hspace{1cm}}$	OUTH AND COMM	IUNITY OUTREAC	H INC.	
N1200 DOCUMENT NUMBER:	0008679			
The enclosed Articles of Amendme	u and fee are submi	tted for filing.		
Please return all correspondence cor	ncerning this matter	to the following:		
HELMI EL AGHA				
	()	Name of Contact Pers	son)	
YOUTH AND COMMUNITY OU	TREACH INC.			
		(Firm/ Company)		
4990 W. IRLO BRONSON MEM	HWY			
		(Address)		· · · · · · · · · · · · · · · · · · ·
KISSIMMEE, FL 34746				
	((City/ State and Zip Co	ode)	
IMAMABUFARAH@GMAIL.COM	1			
E-mail ac	dress: (to be used for	or future annual repor	t notification)
For further information concerning t	his matter, please co	all:		
HELMI EL AGHA		at		948-9958
(Name	of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following	g amount made paya	ible to the Florida De	partment of S	state:
S35 Filing Fee S43 Cer	.75 Filing Fee & □ tificate of Status	l\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corpo P.O. Box 6327 Tallahassee, FL 33	rations	Ame Divis Clifte	et Address indment Section ion of Corpoon Building Executive Co	rations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

P 1:87

YOUTH AND COMMUNITY OUTREACH INC.

TOOTH AND COMMONT TOO THEACHT INC.	1-1
(Name of Corporation as currently filed with the Florida Dept. of State)	1
N12000008679	
(Document Number of Corporation (if known)	E YAN GIBS
Pursuant to the provisions of section 617,1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adamendment(s) to its Articles of Incorporation:	dopts the following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address:	•
Name of New Registered Agent:	
Hame of Hen Registrea Agent.	
(Florida street address)	
New Registered Office Address:	
Placida	
	 Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the p.	mvitina
- 1. 2 1. 2 1. 2. Spyromone in the grant of agent. I am jumina with and accept the divinguitors by the p	· (-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(

Signature of New Registered Agent, if changing

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>V</u> <u>Mik</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	AJAZ AFZAL	4990 W. Irlo Bronson Mem Hwy
Add			Kissimmee, FL 34746
X Remove			
2) Change	VP	WAFAA KHATÉEB	4990 W. Irlo Bronson Mem Hwy
X Add			Kissimmee, FL 34746
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		-	
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
(Mach additional sheets, if necessary). (Be specific)			
	<u>,</u>		
· · · · · · · · · · · · · · · · · · ·			
			
			
	 .		

Fhe date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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, this date will not document's effective date on the Department of State's records.	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.	
Dated 5 27 19	
Signature HA DA	_
(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)	
HELMI EL AGHA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	