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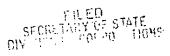
**C** LEWIS

## COVER LÉTTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: INSIDEOUT COMM	UNITY MINISTRIES, INC
N12232 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matter	to the following:
RANDY FUCHS	
	(Name of Contact Person)
INSIDEOUT COMMUNITY MINISTRIES, INC	
	(Firm/ Company)
P.O. BOX 17663	
	(Address)
ST. PETERSBURG, FL 33762	
	(City/ State and Zip Code)
INFO@INSIDEOUTCMI.COM	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please of	call:
RANDY FUCHS	217 306-6058 at
(Name of Contact Person)	
Enclosed is a check for the following amount made pay	vable to the Florida Department of State:
\$35 Filing Fee	
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



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INSIDEOUT COMMUNITY MINISTRIES, INC		10 m is
(Name of Corporation as	currently filed with the Flor	ida Dept. of State)
N12232		
(Document	Number of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name	orporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX		
D. If amending the registered agent and/or registered new registered agent and/or the new registered o	ed office address in Florida, ffice address:	enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flo	orida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept	the obligations of the position.
	Signature of New Registe	ered 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	PT         John E           V         Mike J           SV         Sally S	lones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) Change	D	HAYES JEANNE	P.0, BOX 298408
Add			WASILLA, AK 99629
X Remove			
2) Change	D	PIZZO MARTIN	114 CARLISLE COURT
Add			KISSIMMEE, FL 34758
X Remove			
3) Change	D	MCCARTHY SHEENA	3960 SUWANEE PLACE DRIVE
Add	_ <del>_</del>		SUWANEE, GA 30024
X Remove			
4) Change	VP ·	COLLIER TERRY	5230 DENVER STREET NE
Add			ST. PETERSBURG, FL 33703
X Remove			
5) Change	D, VP	WILLIAM KARNS	286 107TH AVENUE
X Add			SUITE 300
Remove	•		TREASURE ISLAND, FL 33706
6) Change	D	CHIP YOUNGE	600 SE 48TH AVENUE
X Add			OCALA, FL 34471
Add			
			<del></del>

•	If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
		<u> </u>
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-		
-		

	3/1/2016
The date of each amendment(s) adop	otion: Fig. 1.19 , if other than the
date this document was signed.	NOTATION OF SOLUTIONS
3/1/201 Effective date if applicable:	
	(no more than 90 days after amendment file date) 16 APR -4 AM 10: 36
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not be listed as the timent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop was/were sufficient for approval.	sted by the members and the number of votes cast for the amendment(s)
There are no members or member adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were
3/1/2016 Dated	
Signature	ndal L. Fuchs
	in or vice chairman of the board, president or other officer-if directors
	selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)
RANDY FU	JCHS
	(Typed or printed name of person signing)
PRESIDEN	τ
<del></del>	(Title of person signing)