N130000000878

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T. BROWN

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: New Life C	ommunity Fe	llowship Center.org	
DOCUMENT NUMBER: N1300000	878		
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
Denzil S Vascianna			
	(Name of Contact Person	າ)	
New Life Community Fel	lowship Ce	nter.org	
_	(Firm/ Company)		
1100 S SR 7 Sufe	103		
	(Address)		
Margate, FL 33068			
	(City/ State and Zip Code	e)	
upwardlife@hotm	ail.com		
E-mail address: (to be used		notification)	
For further information concerning this matter, please	call:		
Denzil Vascianna	_{at} 954	200-2583	
(Name of Contact Person)		ode & Daytime Telephone Number)	
Enclosed is a check for the following amount made page	yable to the Florida Depa	artment of State:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section		Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



New Life Community Fellowsh	ip Center.org. Inc
(Name of Corporation as currently filed with the F	lorida Dept. of State)
N13000000878	
(Document Number of Corpo	oration (if known)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:
New Life Community Fellowship Cer	nter, Inc.
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name	ration" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable:	1100 S SR 7 Margate FL 33068
(Principal office address <u>MUST BE A STREET ADDRES</u>	(2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P O Box 26222
	Tamarac FL. 33068
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
(Cit)	y) (Zip Code)
New Registered Agent's Signature, if changing Registere	ed Agent:

Page 1 of 4

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change Add Remove		
2) Change	_ \	
Add	/ (// ,	
Remove		
3) Change	_/ _/	
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		-
Remove		
6) Change		
Add		
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attach additional shee	ts, if necessary).	ticles, enter chans (Be specific)		
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The	date of each amendment(s) adoption: 4/5/3013
Effe	ective date if applicable: 4/8/2013
	(no more than 90 days after amendment file date)
Ado	option 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 04/05/2013
	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)
	Denzil Vascianna
	(Typed or printed name of person signing)
	President
	(Title of person signing)