N13000000 2307

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF COME
AND AND ASSEEL FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ion: <u>NeW</u>	Hope outre	ach Ministries	At Jax Inc
DOCUMENT NUMBER	: <i>N_A</i>			
The enclosed Articles of A	mendment and fee are su	bmitted for filing.		
Please return all correspond	dence concerning this ma	tter to the following: About Name of Contact Person		
	106 E. S. Nacclenn	Firm/Company FAUSELL A Address Y F/A, 3.	ve 2063	·
aki	^	City/ State and Zip Code // 43 (3) Va h ou sed for future annual report		
For further information cor	AKIUS ontact Person	at (706		
Enclosed is a check for the	following amount made	payable to the Florida Depa	urtment of State:	
□ \$35 Filing Fee	2\$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	<u>Address</u>	Street	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

Priscilla Ann Naniels Akins
(Name of Corporation as currently filed with the Florida Dept. of State)
N1300002307
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
NEW HOPE Outreach Ministries At JAX JUC The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: 723 Memorial Park Rd (Principal office address MUST BE A STREET ADDRESS)
(Principal office address MUST BE A STREET ADDRESS) Jackson Ville FlA.
32221
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
X / //
$\mathcal{N}_{\mathcal{I}}$
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:
<u>, </u>
Name of New Registered Agent:
(Florida street address) New Registered Office Address:
New Togstered Office Tauress.
, Florida
(City) (Zip 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 position.
Signature of New Registered Agent, if changing

Page 1 of 4

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		Doe Lones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove	↓	Dorothy Ford	1338 Tony Divens Rd SANDERSON FLAI 32087
2) Change Add Remove	<u>V</u>	Tequelay. Akins	2040 St mary FIA
3) Change Add Remove	<u>s</u> _	Jenell Williams	1532 Steele st Jacksonville FlA. 32209
4) Change Add Remove	<u>5</u>	Priscilla L. Akins	2443 Aubrey Dr Jackson Fla. 32208
5) Change Add Remove			
6) Change Add Remove	<u></u>		

E. If amending or adding additional Articles (attach additional sheets, if necessary). (I	s, enter change(s) here:
(attach additional sheets, if necessary). (I	Be specific)
N/A	
N/H	
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The date of each amendment(s) adoption: W/arch // 20/4 date, this document was signed.	, if other than the
Effective date if applicable: 4/4	
(no more than 90 days after amendment file date)	
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 March 12, 2014	
Signature Museulle Ann Daniels Aking	
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)	
Priscilla Ann Daniels Akins	
(Typed or printed name of person signing)	
(Title of person signing)	