

N13000008910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

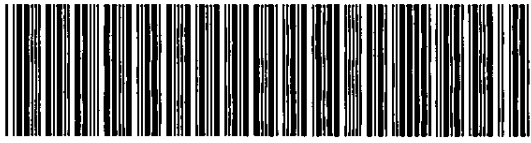
(Business Entity Name)

(Document Number)

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STATE FILING OFFICE

Amend/CC
@ 5/2/14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALL IN ONE COMMUNITY CENTER, INC

DOCUMENT NUMBER: N13000008910

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHERLYN LEONARD

(Name of Contact Person)

ALL IN ONE COMMUNITY CENTER, INC

(Firm/ Company)

1236 N PINE HILLS RD B

(Address)

ORLANDO, FL 32808

(City/ State and Zip Code)

SHERLYNLEONARD@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHERLYN LEONARD

(Name of Contact Person)

at (407) 295-8683

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|--|--|

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

ALL IN ONE COMMUNITY CENTER, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N13000008910

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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 "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
SECRETARY OF STATE
14 APR 25 PM 21 56

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: SHERLYN LEONARD

1236 N PINE HILLS RD B

(Florida street address)

New Registered Office Address:

ORLANDO, Florida 32808

(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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>DON MITCHELL</u>	<u>1236 N PINE HILLS RD</u> <u>B</u> <u>ORLANDO, FL 32808</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>SHERLYN LEONARD</u>	<u>1236 N PINE HILLS RD</u> <u>B</u> <u>ORLANDO, FL 32808</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>ROSA LONG</u>	<u>ORLANDO, FL 32808</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>LUCINDA MYERS</u>	<u>5619 SILVER SPRUCE DR</u> <u>ORLANDO, FL 32808</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>C</u>	<u>DENISE APONTE</u>	<u>2236 RIO PINAR LAKES BLVD</u> <u>ORLANDO, FL 32822</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>C</u>	<u>ORESTE SAINT-FILUS</u>	<u>3051 GOLDEN ROCK DR</u> <u>ORLANDO, FL 32818</u>

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.

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<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>V</u>	<u>DON MITCHELL</u>	<u>1236 N PINE HILLS RD</u>
<input type="checkbox"/> Add			<u>B</u>
<input checked="" type="checkbox"/> Remove			<u>ORLANDO, FL 32808</u>
2) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>
3) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>
4) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>
5) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>
6) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

This corporation is organized exclusively for one or more of the purpose as specified in Section 501 (c)(3) of the Internal Revenue Code, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501 (c)(3)of the Internal Revenue Code, or corresponding section of any future federal tax code. Further, the corporation is organized to provide support throughout the community through various activities. Each activity is exclusively religious and based on the counseling of the Holy Bible and the building of God's Kingdom.

This corporation will not attempt to influence legislation as a substantial part of its activities and will not participate at all in campaign for or against political candidates.

In addition, none of the earnings of the corporation will inure to any private shareholder or individual, except for reasonable compensation for services rendered.

If the corporation dissolves, its assets must be distributed for an exempt purpose within the meaning of Section 501 (c) (3).

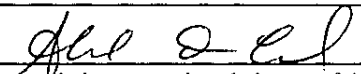
The date of each amendment(s) adoption: APRIL 19, 2014, if other than the date this document was signed.

Effective date if applicable: APRIL 19, 2014
(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 APRIL 19, 2014

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)

SHERLYN LEONARD

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)