N14000000458

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	₩AIT	MAIL		
(Bu	isiness Entity Nai	me)		
· (Dc	cument Number))		
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COVER LETTER

TO: Amendment Section Division of Corporations National American Outreach Foundation Inc. 14000000458 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Adriana Montoya - President/ceo
(Name of Contact Person)

National American Outreach Foundation Inc.
(Firm/Company) Florida 34734 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □ \$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee

> Certified Copy (Additional copy is

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status

(Additional Copy is Enclosed)

Certified Copy



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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 13, 2014

NATIONAL AMERICAN OUTREACH FOUNDATION, INC. % ADRIANA M. MONTOYA 7345 SANDLAKE ROAD #404 ORLANDO, FL 32819

SUBJECT: NATIONAL AMERICAN OUTREACH FOUNDATION, INC.

Ref. Number: N14000000458

We have received your document for NATIONAL AMERICAN OUTREACH FOUNDATION, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 014A00021870



November 6, 2014

NATIONAL AMERICAN OUTREACH % ADRIANA M. MONTOYA 9309 LAKE LOTTA CIRCLE GOTHA, FL 34734

2nd mailing

SUBJECT: NATIONAL AMERICAN OUTREACH FOUNDATION, INC.

Ref. Number: N14000000458

We have received your document for NATIONAL AMERICAN OUTREACH FOUNDATION, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Irene Albritton Regulatory Specialist II

Letter Number: 014A00021870

Articles of Amendment

\to

Articles of Incorporation of

National America	n Outreach	Toundation	1 toc
(Name of Corporation as currently filed with the Flor			
N -L4	0000004	58	
(Document Number of Co			
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Proj</i>	fit Corporation adopts the fol	lowing
A. If amending name, enter the new name of the corporation	on: N.A.		he new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	ion" or "incorporated" or i	the abbreviation "Corp." or	"Inc. "
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	9309 l Circle.	ake Lotta	•
	FL. 342	134 134	
C. Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX)	_POBOX	1016	
	COTHA	FL 34734	(
D. If amending the registered agent and/or registered office		r the name of the	
new registered agent and/or the new registered office a	<u>idress:</u>		
Name of New Registered Agent:	11		
New Registered Office Address:	(Finida sired uddress)		
(City)		, Florida(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: niliar with any accept the o	bligations of the position.	
Cima da CAI	Basic and April 15-th		引掘し
Signature of New	Registered Agent, if changi	″g -	1 357
1	Page 1 of 4	;	
			9 3

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 Do V Mike Jo SV Sally Si	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove		Kathy Gibson	Fawn drive Orlando FL 32817
(^c 2) Change		Ronney Oliveiro	
Removey Change Add	D	Steven Scarpi	Ave. Ocoee Fl.
Remove (4) Change	Di	Hernan Sala	34761 15 <u>5348 N. Cumberland</u> Ave. Apt. 314. Chicago
Add Remove) 5) Change	D E	-duard Kotlyarov	IL. 60656 Jr. 1290 NE 4th Ct.
Add Remove	PT	Adriana Monto	Boca Raton FL. 33432 ya 9309 Lake Lotta
Add :	CEO	Page 2 of 4	Circle Gotha FL. 34734

itach additional sh	ling additional Articl neets, if necessary).	(Be specific)	•		
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Page 3 of 4

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after umendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s)	
There are no members or memb adopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated 11.2	4/14	
Signature	- fait	
	nan or vice chairman of the board, president or other officer-if directors	
	n selected by an incorporator — if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
Adria	ana M. Montoya	
	(Typed or printed name of person signing)	
$-p_{i}$	resident - CEO	
	(Title of person signing)	

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 Signature (By the chairman or vice on airman 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) Adviana M. Mahayaa (Typed or printed name of person signing) President of CECO	The date of each amendment(s) ad date this document was signed.	option:	, if other than th
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 Signature (By the chairman or vice on irrange 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) Addiana M. Mandowa	Effective date if applicable:		
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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 Signature (By the chairman or vice onairman 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) Adviana M. Monhoua	Adoption of Amendment(s)	(CHECK ONE)	
Dated Signature (By the chairman or vice on airman 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) Adriana M. Montova	` '	· ·	
Signature (By the chairman or vice on airman 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) Adriana M. Montova			
(By the chairman or vice onairman 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) Adriana M. Montova	Dated 11. 23	4 14 /	
have not been selected/by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Adriana M. Montova		facility	
Adriana M. Montoya (Typed or printed name of person signing) Piesiclent - CEO	have not beer	is selected, by an incorporator - if in the hands of a receiver, trustee, or	
(Typed or printed name of person signing) $President - CED$	Adric	ina M. Montoya	
President - CED	7 (Typed or printed name of person signing)	
(Title of person signing)	- P;	resident - CEO	