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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Reach Orlo	and o Church,	Inc.	
DOCUMENT NUMBER: <u>414000080</u>	29	 	
The enclosed Articles of Amendment and fee are subr	nitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Aclam Parsons			
	(Name of Contact Perso	n)	
Reach original Church Inc.			
,	(Firm/ Company)		
7551 Citrus Ave # 1748			
1551 CHOS INC # 1170	(Address)		
Culdered to 399.22			
Coldenrock, FL 32733	(City/ State and Zip Cod	e)	
adame reachorlando, com E-mail address: (to be used	for future annual report	notification)	
-		notification)	
For further information concerning this matter, please	call:		
Adam Parsons	w(5	20) 907 - 3783	
(Name of Contact Person		rea Code) (Daytime Telephone	Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	artment of State:	
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)		
Mailing Address		Address	
Amendment Section Division of Corporations		Iment Section of Corporations	

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

Articles of Incorporation of



(Name of Corporation as curre	ently filed with the Flor	AC. 16 JAN -4 PM 3: 33 rida Dept. of State) SECRETARY OF STATE TALLAHASSEE, FLORID
		TALLAHASSEE, FLURIO
(Document Num	nber of Corporation (if k	nown)
rsuant to the provisions of section 617.1006, Florida Statuendment(s) to its Articles of Incorporation:	ites, this Florida Not Fo	r Profit Corporation adopts the following
If amending name, enter the new name of the corpora	ntion:	
		The new
me must be distinguishable and contain the word "corpor tompany <mark>" or "Co." may not be used in the name</mark> .	ration" or "incorporated	d" or the abbreviation "Corp." or "Inc."
Enter new principal office address, if applicable:	Adam Po	แนอง
incipal office address <u>MUST BE A STREET ADDRESS</u>		dale Drive
	- MIVIET HOW	K FL 31792
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(mailing dauress MAT BE A FOST OFFICE BOA)		
If amending the registered agent and/or registered of	fice address in Florida,	enter the name of the
new registered agent and/or the new registered office		
Name of New Registered Agent:		1
New Registered Office Address:	(Fi	orida street address)
New Registerea Office Adaress.		
	(Cini)	, Florida (Zip Code)
	(City)	(Lip Code)
w Registered Agent's Signature, if changing Registere reby accept the appointment as registered agent. I am j	d Agent:	the obligations of the position
гову иссерь те арропители из гезылегей изели. Тит ј	атиш жин ана ассері	the congunous of the position.
	Signature of Nau Pagis	tored 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 <math>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 Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			·
Add			
Remove			
6) Change			-
Add			
Remove			

If amending or adding additional Artication and Artication additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	t be listed as the
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 01 02 2016	
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)	
Adam C. Parsons (Typed or printed name of person signing)	
President	
(Title of person signing)	