N14000011037

| (Req | uestor's Name) | |
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| (Add | ress) | |
| (Add | iress) | |
| (City | /State/Zip/Phone | #) |
| PICK-UP | WAIT | MAIL |
| (Bus | iness Entity Nam | ne) |
| (Doc | cument Number) | |
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JAN 1 4 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section **Division of Corporations**

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|---|
| NAME OF CORPORATION: GOOD Childrens Return Home Outreach Ministry Inc |
| DOCUMENT NUMBER: N14000011037 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Eugene Stanley JR (Name of Contact Person) |
| (Name of Contact Person) |
| God Childrens Return Home Outreach Ministry inc (Firm/Company) |
| 1341 NW 177th Terr |
| (Address) |
| Miami, Fl 33169 |
| (City/ State and Zip Code) |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Fugene Stanley JR at (786) 536-0191 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| \$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee \\ Certificate of Status \\ (Additional copy is \\ enclosed) \\ (Additional Copy is \\ Enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the Florida Dept. of State) | ======================================= |
|--|---|
| | 55 |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> amendment(s) to its Articles of Incorporation: | adopts the following |
| A. If amending name, enter the new name of the corporation: | The |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviatio "Company" or "Co." may not be used in the name. | n "Corp." or "Inc. |
| 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) | |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of t new registered agent and/or the new registered office address: Name of New Registered Agent: | <u></u> <u>he</u> |
| | |
| New Registered Office Address: | |
| (City), Florida | (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 | e 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 | PT John I V Mike . SV Sally S | <u>Jones</u> | |
|----------------------------------|---|-----------------|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add Remove | DFC | Sherman NewSome | 18030 NW 41 st PL mam, F1 33055 |
| 2) Change Add Remove | | | |
| Change Add Remove | | | |
| 4) Change Add Remove | | | · · · · · · · · · · · · · · · · · · · |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | | |

Page 2 of 4

| If amending or adding additional Arti- attach additional sheets, if necessary). | (Be specific) |
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| The date of each amendment(s) adoption: 1 9 2015 date this document was signed. Effective date if applicable: 1 9 2015 (no more than 90 days after amendment file date) | , if other than 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 192015 | |
| Signature Ey w | |
| (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) | |
| Eugene Stanley JR (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |