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| Certified Copies | Certificates | of Status |
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| Special Instructions to F | iling Officer: | |
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

Amend CC 10 4.28.15

COVER LETTER

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TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: New Life (| Outreach Wo | rship Center, Inc. | | |
|---|--|--|--|--|
| DOCUMENT NUMBER: N1500001 | 256 | | | |
| The enclosed Articles of Amendment and fee are sub | mitted for filing. | | | |
| Please return all correspondence concerning this matt | er to the following: | | | |
| LaVanya Kelly | | | | |
| | (Name of Contact Person | 1) | | |
| New Life Outreach Wors | ship Center, | Inc. | | |
| | (Firm/ Company) | | | |
| 9020 NE 8th Avenue, Unit 2D | | | | |
| (Address) | | | | |
| Miami Shores, FL 33138 | | | | |
| (City/ State and Zip Code) | | | | |
| lavanyakelly@comcast.net | | | | |
| E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| LaVanya Kelly | _{at} 305 | 757-4491 | | |
| (Name of Contact Person) | | ode & Daytime Telephone Number) | | |
| Enclosed is a check for the following amount made pa | ayable to the Florida Depa | artment of State: | | |
| □ \$35 Filing Fee □\$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 Address Amendment Section Division of Corporations P.O. Box 6327 | Amend Divisio | Address Iment Section on of Corporations Building | | |

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

New Life Outreach Worship Center, Inc

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

N1500001256

(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:

N/a

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

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 the new registered agent and/or the new registered office address:

| Name of New Registered Agent: | n/a | | |
|--------------------------------|--------------------------|-------------|------------|
| New Registered Office Address: | (Florida street address) | | |
| | | , Florida | |
| | (City) | | (Zip Code) |

New Registered Agent's Signature, if changing Registered Agent:

(Principal office address MUST BE A STREET ADDRESS)

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: X Change X Remove X Add | V Mil | n Doe ke Jones ly Smith | |
|----------------------------------|--------------|-------------------------------|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | SD | Veronica Linder | 789 NW 7th Avenue Miami, FL 33127 |
| Remove 2) Change Add | <u>TD</u> | Dasmine Mayo | 789 NW 7th Avenue Miami, FL 33127 |
| Remove 3) Change X Add | SD | Danette Simmons | 18821 NW 17th Court Miami Gardens, FL 33056 |
| 4) Change X Add Remove | TD | Diana Dozier | 650 NE 85th Street, Apt. 11 Miami, FL 33138 |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | | |

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| The date | , if other than the | | | | |
|---------------|--|-------------|--|--|--|
| Effe | Effective date if applicable: | | | | |
| | (no more than 90 days after amendment file date) | , | | | |
| Ado | option 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 4/17/2015 Signature M MM KAD | | | | |
| | (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) | | | | |
| LaVanya Kelly | | | | | |
| | (Typed or printed name of person signing) | | | | |
| | President | | | | |
| | (Title of person signing) | | | | |