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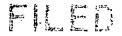
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: American	Ifa,Inc.				
DOCUMENT NUMBER: N15000010408					
The enclosed Articles of Amendment and fee are sub	mitted for filing.				
Please return all correspondence concerning this matt	er to the following:				
Queenchiku Ngozi					
	(Name of Contact Person)			
	(Firm/ Company)				
3204 SW 26 Way, #A					
	(Address)				
Gainesville, Florida 3260	08				
	(City/ State and Zip Code)			
ochabi whitedove	e@yahoo.co	om			
E-mail address: (to be used					
For further information concerning this matter, please	call:				
Queenchiku Ngozi	₃₁ , 352	241-9884			
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)			
Enclosed is a check for the following amount made p	ayable to the Florida Depa	rtment of State:			
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	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 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation** of



American Ifa, Inc.

16 FEB 11 AM 8: 13

(Name of Corporation as currently filed with the Florida Dept. of State) N15000010408

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1110000010100			
(Docu	iment Number of Co	rporation (if known)	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati		s, this <i>Florida Not For P</i>	rofit Corporation adopts the followin
A. If amending name, enter the new na	me of the corporation	on:	
			The nev
name must be distinguishable and contain "Company" or "Co." may not be used in		on" or "incorporated" (or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u>	f applicable: 'REET ADDRESS')		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST C			
D. If amending the registered agent and new registered agent and/or the new			ter the name of the
new registered agent and or the new			
Name of New Registered Agent:	Queenchiku	inguzi	
	3204 SW 20	6 Way #A	
New Registered Office Address:		Florida street address)	
	Gainesville		, Florida 32608
	(City)		(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			obligations of the position.
	Signature of New 1	Registered Agent, if chan	ging

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	V Mik	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	D	Queenchiku Ngozi	3204-A SW 26 Way
Add			Gainesville, Fl.
Remove			32608
2) X Change	D	Melba Ferreli	4862 Hiebs Grove Way
Add			Cooper City, Fl.
Remove			33330
3) Change	D	IFABULUJE-IFASEYE, AYABA-OCHABI	3204-A SW 26 Way
Add			Gainesville, Fl.
X Remove			32608
4) Change	D	ABIYE-UNSI-TASSINON, AYABA ERELU O	4862 Hiebs Grove Way
Add			Cooper City, Fl.
X Remove			33330
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
please change and add the following information to Article III:
ARTICLE III-a:
The specific purpose for which this corporation is organized is:
The purpose for corporation is organized is exclusively religious,
charitable, scientific, literary and educational 1986 & operate
as not-for-profit IRS Laws.
ARTICLE III-b:
Upon the dissolution of the organization, assets shall be distributed for
one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal
Revenue Code, or corresponding section of any future federal tax code,
or shall be distributed to the federal government, or to a state or local
government, for a public purpose. Any such assets not disposed of shall be disposed
of by a court of competent jurisdiction in the county in which the principal
office of the organization is then located, exclusively for such purposes or to such
organization or organizations, as said Court shall determine which are
organized and operated exclusively for such purposes.

	date of each amendment(s this document was signed.) adoption: 12/30/2015	, if other than the
	_	1/1/2016	
2110	<u> </u>	(no more than 90 days after amendment file date)	
Ado	ption of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/wer was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
	There are no members or madopted by the board of dir	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
	Signature (By the e	chairman of view chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or our appointed fiduciary by that fiduciary)	
	Queenc	hiku Ngozi	
	 	(Typed or printed name of person signing)	
	Director	Executive Directoria	
		(Title of person signing)	