Mocoocoll

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



000323780690

0/28/19-01039--004 ↔52.50

2019 JAN 28 PM 3: 10 SLOPED AND SELSONIO

R. WHITE

COVER LETTER

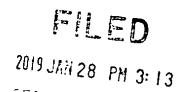
TO: Amendment Section Division of Corporations

NAME OF CORPORATION		stries Outreach Christia	n Center	
	17053-220-30900-7			
DOCUMENT NUMBER:				
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
Latasha Smith				
		(Name of Contact Perso	n)	u
Revealing Truth Ministries	Outreach Christian Center			
		(Firm/ Company)		
3001 SW College Rd. #111				
		(Address)	**	
Ocala, FL 34474				
	((City/ State and Zip Cod	le)	,
info@revealingtruthocc.org				
E	-mail address: (to be used	for future annual report	notification	<u>i)</u>
For further information cone	erning this matter, please o	call:		
Latasha Smith		35 at		209-7515
	(Name of Contact Person)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida Dep	artment of S	State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee leate of Status led Copy tional Copy is used)
Mailing A	ddress	Street	Address	

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 to Articles of Incorporation of



Revealing Truth Ministries Outreach Christian Center

(Name of Corporation as o	currently filed with the Flo	rida Dept. of State)
17053-220-30900-7		rida Dept. of State)
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	K)	
(muning unitess MAT BE AT OST OXITICE BOX	<u> </u>	
D. If amending the registered agent and/or registered		, enter the name of the
new registered agent and/or the new registered o	mice address:	
Name of New Registered Agent:		
	//	Tarifa and a March
New Registered Office Address:	{ r	lorida street address)
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent. I		t the obligations of the position.
	Signature of New Regis	tered 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		<u>1 Doe</u> e Jones	
X Add		v Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
	D		
1) Change	Director	Ethel Quarles	8772 SW 93rd Circle
Add			Ocala, FL 34481
X Remove			
	D Director	Gary Thornton	3001 SW College Rd #111
2) Change			Ocala, FL 34474
X Add			——————————————————————————————————————
Remove	D		
3) X Change	Director	Maurice Williams (address change)	3001 SW College Rd. #111
Add			Ocala, FL 34474
Remove			
4) Change			
Add			
Remove			
-			
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)			
Amend monthly Board Meetings to Annual Board Meetings. We will have called meetings when necessary.			
	•		
	•		

	1-18-2019	
	date of each amendment(s) adoption:	_, if other than the
late	this document was signed.	
Effe	tive date if applicable:	
	(no more than 90 days after amendment file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records.	be listed as the
Ada	otion 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.	
	1-18-2019 Dated	
	Signature Stur R Smile	_
	(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)	
	Steven R. Smith, Pastor	
	(Typed or printed name of person signing)	
	Chairman of the Board	
	(Title of person signing)	