NILOCOCCO 3131

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

TRANSFORM O NAME OF CORPORATION:	UTREACH, INC.		
N160000031	31		
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
KEYOMI JONES			
	(Name of Contact Po	erson)	
TRANSFORM OTREACH, INC.			
	(Firm/ Company	ý)	
295 E. 5TH ST			
	(Address)		
APOPKA, FL. 32703			
	(City/ State and Zip	Code)	
TRANSFORMOUTREACHING	GMAIL.COM		
E-mail address: (to be used	for future annual rep	port notification	n)
For further information concerning this matter, please of	call:		
KEYOMI JONES	at	321	202-5185
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	yable to the Florida I	Department of	State:
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status		Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ar Di	reet Address nendment Secti vision of Corpo ifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

FILED

2018 NOV 26 PM 1:59

TRANSFORM OUTREACH, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N16000003131

ANY OF STATE

(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:
N/A	The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
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 Register I hereby accept the appointment as registered agent. I am	
	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		Doe : Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
X Change	CFO	BERNICE HUGHLEY	4385 S. KIRKMAN RD
Add			ORLANDO, FL. 32811
Remove			
2) X Change	CFO	KEYOMI JONES	232 W 10TH ST
Add			APOPKA, FL. 32703
Remove X Change	coo	MICHEAL SIMMONS JR.	215 W 12TH ST
Add			APOPKA, FL. 32703
Remove			
4) X Change	COO II	MELVIN BOLDEN	6737 CRESCENT RIDGE RD
Add	******	-	ORLANDO, FL. 32810
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)

THE BOARD MEMBERS ARE ONLY BEING CHANGED BY TITLE TO SHOW THEIR CORRECT TITLES.
PLEASE REFERNCE PAGE 2 OF 4.
THE ARTICLES OF INCORPARTIONS DID NOT INCLUDE THE CORRECT WORDING, IT'S NOW BEING ADDED
TRANSFORM OUTREACH IS ORGANIZED EXCLUSIVLEY FOR CHARITABLE, RELIGOUS, EDUCATIONAL &
SCIENTIFIC PURPOSES INCLUDING FOR SUCH PURPOSES THE MAKING OF DISTRBUTIONS TO ORGANIA
THE QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501 (C) 3 OF THE INTERNAL REVENUE CODE
CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. THIS CORPORATIONIS LEGALLY AND
LAWFULLY ENGAGED IN ACTIVITIES THAT ARE FOR THE BETTERMENT OF THE COMMUNITY.
DISSOLUTION CLAUSE:
UPON THE DISSOLUTION OF THIS ORGANIZATION ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE
PURPOSES WITHIN THE MEANING OD SECTION 501(C)3 OF THE IRS CODE, OR CORRESPONDING SECTION
OF ANY FUTURE TAX CODE, OR SHALL BE DISTRIBUTED TO THE FEDERAL GOVERNMENT, STATE OR
LOCAL GOVERNMENT FOR PUBLIC PURPOSES.

251	21 201H, 2018	
The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
-	SEPT 20TH, 2018	
	SEF 1 20111, 2010	
Effective date if applicable:	ore than 90 days after amendment file date)	
(no me	ore man 90 days after amenament fite activ)	
Nutra (Cake data insurand in this blook down not a	neet the applicable statutory filing requirements, this date will not	he listed as the
		be fisted as the
document's effective date on the Department of S	state's records.	
Adoption of Amendment(s) (CHF	ECK ONE)	
Adoption of Amendment(s)	SCR O(NE)	
☐ The amendment(s) was/were adopted by the	members and the number of votes cast for the amendment(s)	
	members and the number of votes east for the amendment(s)	
was/were sufficient for approval.		
5		
	o vote on the amendment(s). The amendment(s) was/were	
adopted by the board of directors.		
09/20/2018		
Dated		
/		
V		
Signature QQQVII	1 ones	<u> </u>
(By the chairman or vice of	chairman of the board, president or other officer-if directors	
have not been selected, b	y an incorporator - if in the hands of a receiver, trustee, or	
other court appointed fid	uciary by that fiduciary)	
• • • • • • • • • • • • • • • • • • • •		
KFYO	OMI JONES	
	(Typed or printed name of person signing)	
CFG	n	
51 · ·	~	
	(Title of person signing)	