N17000001205

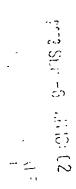
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COVER LETTER

TO: Amendment Section Division of Corporations

NEW RIVER NAME OF CORPORATION:	FELLOWSHIP, INC.			
DOCUMENT NUMBER: N17000001205			<u> </u>	
The enclosed Articles of Amendment and fee a	re submitted for filing.			
Please return all correspondence concerning this	s matter to the following:			
	CHAN KILGORE	;		
	(Name of Contact Pe	rson)		
	(Firm/ Company)		
2890) WEST BROWARD BLVI)., UNIT B #3	316	
	(Address)			
	FORT LAUDERDALE, F	L 33312		CL.
	(City/ State and Zip C	Code)	•	<u> </u>
	CHAN@NEWRIVERFTI	COM		
E-mail address: (to b	e used for future annual rep	ort notificatio	n)	
For further information concerning this matter,	please call:			- <u> </u>
MATTHEW I. WEISSMAN	at	954	533-4197	ानां .
(Name of Contact F		(Area Code)	(Daytime Telep	hone Number)
Enclosed is a check for the following amount m	ade payable to the Florida E	Department of	State:	
■ \$35 Filing Fee □\$43,75 Filing Fe Certificate of St	ce & \$\Bigsis \$\\$43.75\$ Filing Fee & Certified Copy (Additional copy is enclosed)	Centil Centil (Add	0 Filing Fee ficate of Status fied Copy fitional Copy is fisosed)	
Mailing Address Amendment Section	Am	eet Address endment Sect		
Division of Corporations	Div	ision of Corp	orations	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

NEW RIVER FELLOWSHIP, INC.			
(Name of Corporation as currently filed with the Flo	orida Dept. of State)		
N17000001205			
(Document	Number of Corporation (i	f known)	· ·
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	For Profit Corporation adopt	s the following
A. If amending name, enter the new name of the co	rporation:		
			The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorpora	ted" or the abbreviation "Con	rp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	in the second		
trucqui office dadress <u>most BEA STREET ADD</u>			
			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO)</u>	<u>X</u>)		
			
			
D. If amending the registered agent and/or register		da, enter the name of the	
new registered agent and/or the new registered (office address:		
Name of New Registered Agent:			
)
New Registered Office Address:		(Florida street address)	15. L
New Neglisierea Office Address.			(1)
-	(City)	Florida (Zip Code	»)
	•	(Mp Sout	·/
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.		ent the obligations of the posit	ine
тистему ассерстве арронытем актедичетва адет. Т	гат јатина жин ини исси	рі те отқанты ој те ром	Rai.
	Signature of New Reg	istered 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: XChange X Remove X Add	$\underline{\underline{V}}$ $\underline{\underline{M}}$	ohn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>S/I)</u>	RON TOBIAS	2890 W BROWARD BLVD UNIT FT LAUDERDALE, FL 33312
x Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove 5)ChangeAdd			
Remove 6) Change Add			
E. If amending or additional sho		tl Articles, enter change(s) here: ary). (Be specific)	

		
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The date of each amendment(s) adoption date this document was signed.	;	, if other than the
_		
Effective date if applicable:	no more than 90 days after amendment file date)	
(1	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not at of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

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 06.22.23
Signature (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)
CHAN KILGORE
(Typed or printed name of person signing)
סאו פורודר מאר פורודר

(Title of person signing)

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