

N17000003528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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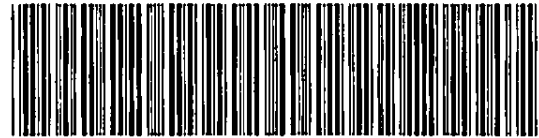
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FEB 06 2018

18 FEB -5 PM 2:34  
FEB 06 2018

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: ESTAH OUTREACH MINISTRIES, INC

DOCUMENT NUMBER: N17000003528

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHANITA JONES

(Name of Contact Person)

JONES ACCOUNTING & TAX SERVICES, INC

(Firm/ Company)

3632 LAND O LAKES BLVD; STE 109

(Address)

LAND O LAKES, FL 34639

(City/ State and Zip Code)

SHANITA@THEACCOUNTINGDIVA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHANITA JONES

(Name of Contact Person)

at 813-525-4321

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
18 FEB -5 PM 2:34

ESTAH OUTREACH MINISTRIES INC

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

N17000003528

(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:**

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

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

1425 N PINE HILLS RD

ORLANDO, FL 32808

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

1425 N PINE HILLS RD

ORLANDO, FL 32808

**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: JONES ACCOUNTING & TAX SERVICES INC

3632 LAND O LAKES BLVD; STE 109

(Florida street address)

New Registered Office Address:

LAND O LAKES

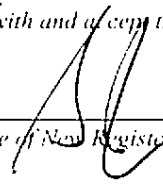
(City)

Florida 34639

(Zip Code)

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

*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 PT 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>LA TONYA P WATSON-WOODRUFF</u>	<u>1425 N PINE HILLS RD</u> <u>ORLANDO, FL 32808</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>HOZRA A WATSON-WOODRUFF</u>	<u>1425 N PINE HILLS RD</u> <u>ORLANDO, FL 32808</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>FIN</u>	<u>SANDRA BROOKINS-CRUDUP</u>	<u>1425 N PINE HILLS RD</u> <u>ORLANDO, FL 32808</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>THERESA MYRICK</u>	<u>1425 N PINE HILLS RD</u> <u>ORLANDO, FL 32808</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>MB</u>	<u>CHEVELLE HOWARD</u>	<u>1425 N PINE HILLS RD</u> <u>ORLANDO, FL 32808</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>MB</u>	<u>WILHEMINA FORD</u>	<u>1425 N PINE HILLS RD</u> <u>ORLANDO, FL 32808</u>

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

DELETE ARTICLES III - VI

ADD ARTICLES III - X - SEE ATTACHED

The date of each amendment(s) adoption: NOVEMBER 14, 2017, if other than the date this document was signed.

Effective date, if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption 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 NOVEMBER 15, 2017

Signature LaTonya Watson-Woodruff  
(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)

LA TONYA WATSON-WOODRUFF  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)