N1700008238

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	YOUTH OUTREAC	H IMPACT INC		
DOCUMENT NUMBER:	N17000008238			
The enclosed Articles of An	nendment and fee are subr	nitted for filing.		
Please return all correspond	ence concerning this matte	r to the following:		
TESHLER P. SENAT				
	<u></u>	(Name of Contact Per	rson)	
SENAT & ASSOCITATES	SINC			
		(Firm/ Company)	-	
6881 KINGSPOINTE PAR	KWAY STE 11			
		(Address)		
ORLANDO, FL 32839				
		(City/ State and Zip C	ode)	
TSENAT76@GMAIL.COM	М			
F.	-mail address: (to be used	for future annual repo	ort notification	<u> </u>
For further information cone	erning this matter, please	call:		
TESHLER P. SENAT			407780-6354	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pag	yable to the Florida D	epartment of	State:
■ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status led Copy tional Copy is sed)
N. W 212				

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

YOUTH OUTREACH IMPACT INC

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(Name of Corporation as c	urrently filed with the Flor	
N1700008238		Note Himbert Comment (I)
(Document	Number of Corporation (if ki	nown)
Pursuant to the provisions of section 617.1006. Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:	
YOUTH IMPACT OUTREACH INC		The new
name must be distinguishable and contain the word "co. "Company" or "Co." may not be used in the name.	rporation" or "incorporatea	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR	RESS)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
maning dual to a rost of fice box	/ 	
	•	
	•	
 If amending the registered agent and/or registered new registered agent and/or the new registered of 	d office address in Florida,	enter the name of the
NIA		
Name of New Registered Agent:		
New Profess LOG ALL	(Fl	orida street address)
New Registered Office Address:		
N/A	<u> </u>	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. It	tered Agent: am familiar with and accept	the obligations of the position.
-	Signature of New Regist	ered 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	<u>V</u> <u>Mi</u>	in <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	N/A	N/A	N/A
Add			
Remove			
2) Change	N/A	N/A	N/A
Add			
Remove			
3) Change	N/A	N/A	N/A
Add			
Remove			
4) Change	N/A	N/A	N/A
Add			
Remove			
5) Change	N/A	N/A	N/A
Add			····-
Remove			
6) Change	N/A	N/A	N/A
Add			
Remove			

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

08/23/2017	
The date of each amendment(s) adoption:	other than the
date this document was signed.	•
N/A	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(no more man 70 days after amenament fite active)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list locument's effective date on the Department of State's records.	ited as the
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.	
08/23/2017	
Dated	
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)	
TESHLER P. SENAT	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	