N1900000 7019

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	- #)
(0)	yrotaterzipii none	· #;
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COVER LETTER

TO: Amendment Section Division of Corporations

. .

NAME OF CORPORATION	Brian Kisner Outreac	•	,		
	N19000007019				
DOCUMENT NUMBER:					
The enclosed Articles of Am	endment and fee are subn	nitted for filing.			
Please return all corresponde	ence concerning this matte	r to the following	; :		
Robert B. Kisner					
·		(Name of Contac	t Person)	<u> </u>	
Brian Kisner Outreach					
	•	(Firm/ Comp	oany)		
9013 Pinebreeze Dr.					
,		(Address	;)		
Riverview, Fl 33578					
		(City/ State and 2	Lip Code)	
brian@needtopray.org					
l:	-mail address: (to be used	for future annual	report n	otification)
For further information conc	erning this matter, please	call:			
Robert B. Kisner			717		377-1772
	(Name of Contact Person)		(Are	a Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Flori	da Depar	tment of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing I Certified Copy (Additional copenclosed)	ı	Certifi Certifi	cate of Status ed Copy ional Copy is
Mailing Address			Street A	Address	0.00

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

			医排 反於
(Name of Corporation as	s current	ly filed with the Florida Dep	t. of State)
Brian Kisner Outreaach Corp. N19000007019			 -
·			-283 JUL 15 A 1: 38
(Document	nt Numbe	er of Corporation (if known)	acts acc 12 W H- 20
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes	s, this <i>Florida Not For Profit</i>	Corporation adopts the following
A. If amending name, enter the new name of the co	orporatio	on:	
Brian Kisner Outreach Corp			771.
name must be distinguishable and contain the word "	 'cornorati	ion" or "incorporated" or the	The new
"Company" or "Co." may not be used in the name.	con por an	on or meorporated or the	aborevitation Corp. in the.
		n/a	
B. Enter new principal office address, if applicable	le:		
(Principal office address <u>MUST BE A STREET AD</u> I	DRESS)		
			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:		m for	
(Mailing address MAY BE A POST OFFICE BO	2X)	n/a	
D. Maria P. Alia da La da Maria	. ~~		
D. If amending the registered agent and/or registe			e name of the
new registered agent and/or the new registered		idress:	
n <u>Name of New Registered Agent:</u>	n/a		
_			
		(Florida stree	et address)
New Registered Office Address:			
n.	ı/a		P1 - 1
_		(Circl)	, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	aistered A	Agent:	
I hereby accept the appointment as registered agent.	I am fam	iliar with and accept the oblid	vations of the position
,			garante of the forestion.
		<u> </u>	
	Sig	gnature of New Registered Ago	ent, 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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change n/a Add n/a Remove		_		
2) Change		_		
Add Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add Remove				
5) Change		-		
Add Remove				
6) Change		_		· · · · · · · · · · · · · · · · · · ·
Add				
Remove				

(attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
n/a	
-	

	n/a	
The date of each amendment(s) add	option:	, if other than the
late this document was signed.		
n/a		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will reartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adwas/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s).	
There are no members or memb adopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
July 12,2019 Dated)	
	LAR X	
Signature 7)Cont	2 / Marie Company	
	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or	
	ppointed fiduciary by that fiduciary)	
	ppointed industry of man industry)	
Robert B	. Kisner	
	(Typed or printed name of person signing)	
President		
	(Title of person signing)	