N 2000 000 5830

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900345637199

08/12/20==01014 -=009 *+35.09

2020 J. 112 PH 2: 02

Kmund

JUL OF ZEZU

ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Outreach, Inc.		
N20000005830			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	ter to the following:		
Susan M. Rodriguez			
	(Name of Contact Person	on)	
Faith Works Global Outreach, Inc.			
	(Firm/ Company)		
2013 River Reach Drive; # 271			
	(Address)		
Naples, FL 34104			
	(City/ State and Zip Co	de)	
Suzen6207@gmail.com			
E-mail address: (to be used	d for future annual repor	notification)	
For further information concerning this matter, please	call:		
Susan M. Rodriguez	(941) 567-74 속 3 at		
(Name of Contact Person		rea Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made pa	ayable to the Florida De	partment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section		dment Section	

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 Articles of Incorporation of

•			
	Articles of Amendme to articles of Incorporati of		12/2
Name of Corporation as currently filed with the Flo Faith Works Global Outreach, Inc.	orida Dept. of State)		
	N 1 663	d'et)	
(Document	Number of Corporatio	л (II known)	
Pursuant to the provisions of section 617.1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida /	Not For Profit Corporati	on adopts the following
·			
A. If amending name, enter the new name of the con	rporation:		
			The new
name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name.	rporation or "incorp	orated" or the abbreviat	ion "Corp." or "Inc."
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADD			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0		<u></u>
). If amending the registered agent and/or registere	od offino addresse in Fl	anida antun tha aureum	
new registered agent and/or the new registered o		ortua, enter the hame o	i the
Name of New Registered Agent:	_		
		(Florida street address)	
New Registered Office Address:	_		
		, Flo	orida
	(City)	(a	Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:	and the state of t	at see
hereby accept the appointment as registered agent. I	am jamuiar wun ana c	иссери ine onugations of i	те роѕтоп.
	Signature of New I	Registered Agent, if chan	ging

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	PT John D V Mike John S SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>DF</u>	Kelly Forrester	1325 Carrilon Woods Drive Centerville, OH 45458
× Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional sheet		icles, enter change(s) here: (Be specific)	
-			
	<u> </u>		

The date of each amendment(s) adoption:, if other than the date this document was signed, if other than the
The date of each amendment(s) adoption: 4/9/2020 , if other than the date this document was signed. Effective date if applicable: (c/9/2020) (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.

adopted by the board of directors.
06/09/2020 Dated
Dated
Signature Some Cody Cody
(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)
(Typed or printed name of person signing)
(Typed or printed name offperson signing)
Exercising (Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were