N2100000 1532

(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:			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requ	uestor's Name)	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Addr	ess)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Addr	ess)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(· · · · · · · ·		
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	·		
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/	State/Zip/Phon	e #)
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	—		
(Document Number) Certified Copies Certificates of Status	☐ PICK-UP	☐ WAII	☐ MAIL
(Document Number) Certified Copies Certificates of Status			
(Document Number) Certified Copies Certificates of Status	(Busi	ness Entity Nar	ne)
Certified Copies Certificates of Status	·	•	,
Certified Copies Certificates of Status	(Doo.	one and Niconia an	
	(1000)	ineni Number)	
Special Instructions to Filing Officer:	Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:			
Special instructions to Filing Officer:	Special Instructions to Ei	inn Officer	
	Special instructions to Fil	ing Oπicer:	

Office Use Only

٠;



400361066114



03/08/21--01018--018 **43.75

2021 HAR -8 AH 8: 32

MAY 2 0 2021

A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Innovative Community Outreach Ir	<u>۱۲</u>
DOCUMENT NUMBER: N21000001532	
The enclosed Articles of Amendment and fee are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
Herman Mclean JR (Name of Contact Person)	
(Name of Contact Person)	
Innovative Community Outreach Ing (Firm Company)	
17/21 N.W. 7+h Place (Address)	
Miami, FL 33169 (City/ State and Zip Code)	
Mcleanherman @gmail.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Herman Mclean Jr at 786-277-3552 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) ☐ \$52.50 Filing Fee & Certificate of Status (Additional copy is Enclosed)	
Mailing Address Amendment Section Amendment 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 to Articles of Incorporation of

2021 Man FILE	
749 3 50	
	د'

THURST COWNE		6 LOS : 1/4
(Name of Corporation as currently filed with the F	lorida Dept. of State)	·
M21000	001532	
(Documer	nt Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
N/A		The new
name must be distinguishable and contain the word "a "Company" or "Co." may not be used in the name.	corporation" or "incorporat	ted" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	e: N/A DRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	DX) _N/A	
D. If amending the registered agent and/or register	red office address in Florid	enter the name of the
new registered agent and/or the new registered	office address:	and the name of the
Name of New Registered Agent:	N/A	
New Registered Office Address:		Florida street address)
		, Florida
-	(Ciŋ·)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	zistered Agent: I am familiar with and acce	ot the obligations of the position.
	Signature of New Regi	stered 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	PT John V Mike SV Sally		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add		Jamie, Epps	729 NW 2nd St Unit 12 Miami, FL 33128
2) Change Add	7	Astrid Moise	1497 N.W. 32nd Street MIAMI FL 33142
Remove 3) Remove Add Remove	<u>5'</u>	Chartin Tolliver	1755 Edge Field Hux 9801
4)ChangeAdd	_5_	Rupert French	1652) N.W. 2351 Fembroke Pank FL 33028
Remove 5) Change Add			
Remove			
Add Remove			
(attach additional she		ticles, enter change(s) here: (Be specific)	· · · · · · · · · · · · · · · · · · ·

e date of each amendment(s) adoption: 22/26/2) if other than this document was signed. ective date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: ORACLE MATERIAL STATES AND ADDRESS AND AD			
date of each amendment(s) adoption:			
date of each amendment(s) adoption: 02/26/2) if other than this document was signed. ettive date if applicable: (no more than 90 days after amendment file date)		· · · · · · · · · · · · · · · · · · ·	
date of each amendment(s) adoption: O2 / 2 8 / 2)		······································	
date of each amendment(s) adoption: O2/28/2) if other than this document was signed. ctive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: OF (S) if other than this document was signed. etive date if applicable: (no more than 90 days after amendment file date)		<u></u>	
date of each amendment(s) adoption:			
date of each amendment(s) adoption:	300		
date of each amendment(s) adoption:			
date of each amendment(s) adoption: \(\begin{align*} \omega & \omega & \begin{align*} \omega & \begin			
date of each amendment(s) adoption: $O2/2$			
date of each amendment(s) adoption:			
date of each amendment(s) adoption: $22/26/2$) if other than this document was signed. etive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: $O(2/2 b/2)$ if other than this document was signed. etive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: $02/26/3)$ if other than this document was signed. etive date if applicable: (no more than 90 days after amendment file date)			
tive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: $O2/28/3$			
date of each amendment(s) adoption: $O2/2$ (s) . if other than this document was signed. This date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: OO/OBO , if other than this document was signed. etive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: 02/26/3). if other than this document was signed. etive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption:			
date of each amendment(s) adoption: OD/2B/2). if other than this document was signed. etive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: $O2/28/31$ if other than this document was signed. etive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: O2/28/3). if other than this document was signed. ctive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: 02/26/21 if other than this document was signed. ctive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: OD/DB/D . if other than this document was signed. ctive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: 02/28/2) if other than this document was signed. ctive date if applicable: (no more than 90 days after amendment file date)			
date of each amendment(s) adoption: O2/28/3) if other than this document was signed. ctive date if applicable: (no more than 90 days after amendment file date)	, 100		
(no more than 90 days after amendment file date)	date of each amendment(s) adoption: $OQ/2B/2$ this document was signed.		, if other than
(no more than 90 days after amendment file date)	ctive date if applicable:		
	(no more than 90 days after amer	ndment file date)	·

The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

a by the bo	ard of directors.
Dated	03/02/2021
Signature	Hernen Melean Ir
Ü	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Herman Molean JR
	(Typed or printed name of person signing)
	Propedon
	(100)