(Requestor's Name)	
(Address)	800130
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	05/30/08-
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	a de la companya de l

Office Use Only



)490388

--01021--004 **35.00

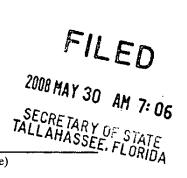
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Christian Li	fe Restoration Center, Inc.
DOCUMENT NUMBER: <u>N9200000047</u> 4	4
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
Gabrielle Alexis, Esq.	
(Name of	Contact Person)
Law Offices of Gabrielle Alexi	s, P.A.
(Firm/	Company)
1325 Congress Avenue, Suite	100
(A	address)
Boynton Beach, FL 33426	
(City/ State	e and Zip Code)
For further information concerning this matter	, please call:
Gabrielle Alexis, Esq.	at (561) 375-8866
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
☑ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is 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



Christian Life Restoration Center, Inc.

N92000000474

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

(Document number of corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit</i> Corporation adopts the following amendment(s) to its Articles of Incorporation:		
NEW CORPORATE NAME (if changing):		
·		
(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may <u>not</u> be used in the name of a not for profit corporation)		
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article		
Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)		
Please change the status of Director Gastride Harrigan to SD and Venante Tellus to D		
2		
Please add the following individuals as directors.		
1. Ketia Noel		
8275 N.W. 1st Street		
Coral Springs, FL 33071		
Title: Director		
2. Sandhers Paul		
5971 NW. 17th PI # 202		
Sunrise, FL 33313		
Title: Director		
(Attach additional pages if necessary) (continued)		

Amendments—continued

Please change the mailing address for Christian Life Restoration Center, Inc. to:

P.O. Box 190277 Lauderhill, FL 33319

The date of adoption of the amendment(s) was: 5/16/08
Effective date if applicable: 5/16/08
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was (were) adopted by the members and the number of votes cas for the amendment was sufficient for approval.
There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.
Signature State as
(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.)
Yolette Fabre
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35