## N93000002249

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
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DIVISION OF CORFORATION

C. LEWIS AUG 19 2014 EXAMMER

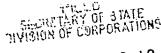
## **COVER LETTER**

TO: Amendment Section Division of Corporations

F		
NAME OF CORPORATION:	rnational Outr	each Center, Inc.
DOCUMENT NUMBER: N9300000224	19	
The enclosed Articles of Amendment and fee are submitte	d for filing.	
Please return all correspondence concerning this matter to	the following:	
Randal P. Gunning		
(Na	me of Contact Person	)
River of Life International (	Outreach <sup>®</sup>	Center, Inc.
	(Firm/ Company)	
P.O. Box 40614		
	(Address)	
St. Petersburg, FL 33743		
(Cit	y/ State and Zip Code	)
info@myrol.org		
E-mail address: (to be used for	future annual report n	otification)
For further information concerning this matter, please call:		
Randal P. Gunning	727	391-5512
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida Depa	rtment of State:
(/	43.75 Filing Fee & lertified Copy Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address  Amendment Section  Division of Corporations	Amenda Division	Address ment Section n of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



14 AUG 11 PM 3: 13

River of Life International O	
N93000002249	ne rioriua Dept. di State)
	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:
N/A	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp." or "Inc."
	N/A
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	n N/A
(mutting waters) MAT BLATOST OF FICE BOX	
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered o	office address:
Name of New Registered Agent: NA	
New Registered Office Address:	(Florida street address)
	F1-24-
	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Regi	
	I am familiar with and accept the obligations of the position.
Signature o	of New Registered 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>	un Doc ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	William Karns	286 - 107th Avenue
$\frac{\mathbf{X}}{\mathbf{X}}_{Add}$			Suite 300
Remove			Treasure Island, FL 33706
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del></del>	_
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Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)				
N/A					
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The date of each amendment(s) ado date this document was signed.	<sub>ption:</sub> May 13, 2014	CHARPETARY OF STATE.  NIVIOUS OF CHARPORATIONS	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after ame	14 AUG     PM 3:   3	<del></del>
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add was/were sufficient for approval.	pted by the members and the number	of votes cast for the amendment(s)	
☐ There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s.	s). The amendment(s) was/were	
Dated Augus	t 5, 201A		
have not beer	nan or vice chairman of the board, pre in selected, by an incorporator – if in the opointed fiduciary by that fiduciary)		
Randal P.	Gunning		
President	Typed or printed name of person sign	ing)	
i resident	(Title of nercon cianing)		