(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL `
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300279125803

11/16/15--01017--022 **35.00

NOV 1 7 2015

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		ional Outreach Center,	Inc.	
DOCUMENT NUMBER:	N93000002249			
	16	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles of Am	endment and lee are subm	nitted for filling.		
Please return all corresponde	ence concerning this matter	r to the following:		
Randal P. Gunning				
		(Name of Contact Pers	on)	
River of Life International C	Outreach Center, Inc.			
		(Firm/ Company)		
P.O. Box 40614				
		(Address)		
St. Petersburg FL 33743				
		(City/ State and Zip Co	ode)	•
info@myrol.org				
Е	-mail address: (to be used	for future annual repor	t notification)
For further information conc	erning this matter, please o	call:		
Randal P. Gunning		7 at	27-391-5512	
	(Name of Contact Person)		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	yable to the Florida De	partment of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee cate of Status ed Copy is sed)
Mailing A	ddress	Stree	et Address	

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



River of Life International Outreach Center, Inc.

15 NOV 16 AM 11:21

(Name of Corporation as	currentl	y filed with th	ie Florida Dept	t. of State)
N93000002249				
(Documer	nt Number	of Corporatio	n (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes,	, this <i>Florida 1</i>	Not For Profit (Corporation adopts the following
A. If amending name, enter the new name of the co	orporatio	<u>n:</u>		
N/A				The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporatio	on" or "incorp	oorated" or the	
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 BO)X) _			
	-	-		
	•			
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office office ad	<u>address in Fl</u> dress:	orida, enter th	e name of the
Name of New Registered Agent:				
_			(Florida street	t address)
New Registered Office Address:				
<u>_</u>				, Florida
		(City)		(Zip Code)
New Registered Agent's Signature, if changing Reg	istered A	gent:		
hereby accept the appointment as registered agent.	I am fami	liar with and a	accept the oblig	ations of the position.
	Sigi	nature of New	Registered Age	nt, 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	$\overline{\underline{V}}$ Mike	<u>Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	VP	Jeffrey R. Ghiotto	589 - 79th Street S.
Add			St. Petersburg, FL 33707
Remove			
2) Change	VP/T/S	Morgan C. Gunning	589 - 79th Street S.
Add			St. Petersburg, FL 33707
X Remove	P/S	Randal P. Gunning	589 - 79th Street S.
3) X Change Add			St. Petersburg, FL 33707
Remove			
4) X Change	Т	William Karns	286 - 107th Avenue, Suite 300
Add	<u>.</u>		Treasure Island, FL 33706
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	
-	
<u></u>	
	<u>. </u>
•	

	* * , *	November 12, 2015		
	date of each amendmen			, if other than the
date	this document was signed			
Effe	ctive date <u>if applicable</u> :	November 12, 2015	DIVISION OF	1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
		(no more than 90 days after	amendment file date) 15 NOV 16	* * * * * * * * * * * * * * * * * * * *
		his block does not meet the applicable sta the Department of State's records.	tutory filing requirements, this date will no	
Ado	ption of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/was/were sufficient for a	were adopted by the members and the num pproval.	nber of votes cast for the amendment(s)	
	There are no members of adopted by the board of	r members entitled to vote on the amendm directors.	nent(s). The amendment(s) was/were	
	Dated Nove	ember /2, 2015	-	
	Signature	Many		
	(By th	e chairman or vice chairman of the board,	president or other officer-if directors	
	other	not been selected, by an incorporator – if court appointed fiduciary by that fiduciar	in the hands of a receiver, trustee, or y)	
	Ra	indal P. Gunning		
	_	(Typed or printed na	ame of person signing)	
	Pro	esident/Secretary		
		(Title of	person signing)	