## N96000000432

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	Oceanside Emmau:	s, Inc.	·	
DOCUMENT NUMBER: _	N98000000432			
The enclosed Articles of Amo	endment and fee are su	omitted for filing.		
Please return all corresponde	nce concerning this ma	ter to the following:		
Kathy Porter				
		(Name of Contact Pe	erson)	
Oceanside Emmaus, Inc				
<del>-</del>		(Firm/ Company	·)	
8650 W. Sample Rd.				
		(Address)		
Coral Springs, Fl. 33068				
		(City/ State and Zip C	Code)	
win1471@comeast.net				
E-1	mail address: (to be use	d for future annual rep	ort notificatio	n)
For further information conce	rning this matter, pleas	e call;		
Kathy Porter		31	954-275-0080	
1)	Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the fol	llowing amount made p	ayable to the Florida D	epartment of	State:
□ \$35 Filing Fee 【	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Ad			eet Address	

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



(Name of Corporation as currently filed with th	ie Florida	Dept. of State)	· · · · · · · · · · · · · · · · · · ·
Oceanside Emmaus, Inc. N98000000432		, ,	
(Docur	ment Num	ber of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statu	ites, this <i>Florida No</i>	ot For Profit Corporation adopts the followin
A. If amending name, enter the new name of th	e corpora	<u>ition:</u>	
			The new
name must he distinguishable and contain the word "Company" or "Co," may not be used in the nam	d "corpore <u>e</u> .	ation" or "incorpor	rated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ıble:	2220 N.W. 70th I	Lane
(Principal office address MUST BE A STREET A	(DDRESS	Margate, Florida	1 33063
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX</u> )	2220 NW 70th L	Lanc
		Margate, Florida I	33063
D. If amending the registered agent and/or regis	stared off	ion addrose in Klass	side as too the same of the
new registered agent and/or the new register	ed office	address:	toa, enter the name of the
Name of New Registered Agent:	Kathy Po	orter	
	2220 NW	70th Lane	
New Registered Office Address:			(Florido street address)
is to registered Office Audress.	Margate		33063
		(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing R	Registered	LAgent:	•
hereby accept the appointment as registered agent	t. I am fa	miliar with and acc	gept the obligations of the position.
	4	A//	22
_	Si	ignation of New Rev	rgistered 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 I           V         Mike           SV         Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>× Change</u> Add Remove	CLL	Kathy Porter	2220 NW 70th Lane Margate, Fl. 33063
2) × Change Add	Treas	Carolyn Curry	10515 NW 4th St. Plantation, Fl.
Remove	Sec	Lauren Didrisen	33324 8870 SW 49th Ct. Davie, Fl. 33328
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			
E. <u>If amending or addin</u> (attach additional shed	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	

•	
The date of such amond and the state of the	
The date of each amendment(s) adoption: 475/2021 date this document was signed.	, if other than the
Effective date if applicable: 1/5/2021	
(no more than 90 days after amendment file	
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes ea was/were sufficient for approval.	est for the amendment(s)

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Dated	1/5/2021
Duted	
Signatu	
	(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)
	Kathy Porter
	Kathy Porter  (Typed or printed name of person signing)