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(C	ity/State/Zip/Phone	e #)
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(D	ocument Number)	
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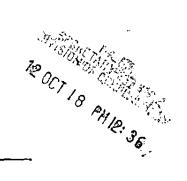
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GRACE & GL	ORY WORS	SHIP CENTER, INC.
DOCUMENT NUMBER:N05	00000765	56
The enclosed Articles of Amendment and fee are submittee	ed for filing.	
Please return all correspondence concerning this matter to	the following:	
ULLI STEINER-MASSEY	_	
(Na	me of Contact Person)
TAX PROFESSIONALS, L	LC	
	(Firm/ Company)	
PO BOX 760		
	(Address)	
GENEVA, AL. 36340		
(Cit	ty/ State and Zip Code)
ULLI@MCQUAIDT.		
E-mail address: (to be used for	future annual report r	otification)
For further information concerning this matter, please call	:	
ULLI STEINER-MASSEY	_{at (} 334	684-6398
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Depa	rtment of State:
(,	43.75 Filing Fee & Certified Copy Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address		Address
Amendment Section Division of Corporations		ment Section n of Corporations
P.O. Box 6327	Clifton	Building
Tallahassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



GRACE & GLORY W	ORSHIP CENT	TER, INC.		
(Name of Corporation as current)	v filed with the Florida	Dept. of State)		•
NO	5000007656			
(Document	Number of Corporation	(if known)	<u> </u>	-
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati		s Florida Not For Profi	il Corporation adopts the	following
A. If amending name, enter the new par	ne of the corporation:			
name must be distinguishable and contain "Company" or "Co." may not be used in	•	or "incorporated" or ti	ne abbreviation "Corp."	_The new or "Inc."
B. Enter new principal office address, it (Principal office address MUST BE A ST				<u>-</u>
C. Enter new mailing address if applic (Mailing address MAY BE A POST O				- - -
D. If amending the registered agent and new registered agent and/or the new			the name of the	
Name of New Registered Agent:	LINDA CUMB			
Mann Al Man Crafting Control and	1430 MERRY	ACRES DR		
New Registered Office Address:		ida streei address)		
, , , , , , , , , , , , , , , , , , ,	CHIPLEY		Florida 32428	
	(City)		(Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as regist Sig	tansing Revistered Age ered agent. I am familion mature of New Registers	ar with and accept the o	bligations of the position.	

Page 1 of 4

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 Doe V Mike Jones SV Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	D	FRANK CUMBAA	1430 MERRY ACRES DR	
Add			CHIPLEY, FL. 32428	
X Remove				
2) Change	D	KYLE COLLINS	682 HIGHWAY 273	
Add			CHIPLEY, FL. 32428	
X Remove	Р	DEBRA WILLIAMS	682 HIGHWAY 273	
3) Change	<u> </u>	DEBRA WILLIAWIS	CHIPLEY, FL. 32428	
Add Remove				
4) X Change	VP.	CINDY BIRGE	682 B HIGHWAY 273	
Add			CHIPLEY, FL. 32428	
Remove				
5) Change	S/T	LINDA CUMBAA	1430 MERRY ACRES DR	
Add			CHIPLEY, FL. 32428	
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

	•				
add	Article >	(l: [DISS	OLU	TION

Upon the dissolution of the organization, assets shall be distributed for one
or more exempt purposes within the meaning of section 501 (c) (3) of the
Internal Revenue Code, or corresponding section of any future federal tax
code, or shall be distributed to the federal government, or to a state or local
government, for a public purpose. Any such assets not disposed of shall be
disposed of by the Court of Common Pleas of the county in which the
principal office of the organization is then located, exclusively for such
purposes or to such organization or organizations, as said Court shall
determine, which are organized and operated exclusively for such purposes.
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Гъ	The date of each amendment(s) adoption: 10-03-2012					
eff	ective date if applicable:					
	(no more than 90 days after amendment file date)					
Add	option of Amendment(s) (CHECK ONE)					
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.					
	There are no members or members emitted to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.					
	Dated 10-03-2012 Signature 200 da Compaga					
	(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)					
	LINDA CUMBAA					
	(Typed or printed name of person signing) REGISTERED AGENT					
	(Title of person signing)					