## 7000002517

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'JUN 0 9 2016 C. CARISTO LAS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	IN GOD I TRUST US	INC.			
DOCUMENT NUMBER:	N12000002512				
The enclosed Articles of An		itted for filing			
_		•			
Please return all corresponde	ence concerning this matter	to the following:			
VINCENT A ROTH					
	(	Name of Contact	Pers	on)	
IN GOD I TRUST US INC					
		(Firm/ Compa	any)		
10300 GIFFORD DRIVE					
•		(Address)	)		
SPRING HILL, FL 34608					
	(	City/ State and Z	ip Co	ode)	
VARVR@;YAHOO.COM					
	-mail address: (to be used	for future annual	repoi	t notification	)
For further information cond	erning this matter, please c	all:			
TIMOTHY S FOGARTY			at	52	3462322
	(Name of Contact Person)		(	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florid	la De	partment of S	tate:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & ☐ Certificate of Status	343.75 Filing F Certified Copy (Additional cop enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A				et Address	on.

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

IN GOD I TRUST US INC.

(Name of Corporation as of	currently filed with the Flo	orida Dent. of State)	
N 1200000 25	A	, , , , , , , , , , , , , , , , , , ,	
(Document	Number of Corporation (if	known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not F	For Profit Corporation adopts the following	(C)
A. If amending name, enter the new name of the cor	poration:		
FUNDING AMERICA'S VOLUNTEERS INC.		The new -	9- NNF 91
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporate	ed" or the abbreviation "Corp." or "Int; of	-6 AM
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI		STATE	8:48
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0		
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	ed office address in Florida ffice address:	ı, enter the name of the	
Name of New Registered Agent:		·	
New Registered Office Address:	(1	Florida street address)	
	•	, Florida	
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		et the obligations of the position.	
	Signature of New Regi	stered Agent, if changing	

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 Do V Mike Jo SV Sally St	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
2) Change			
Add			
3 ) Change Add			
Remove			
4) Change Add	<del></del>		
Remove			
5) Change Add		<del></del>	
Remove			
6) Change Add			
Remove			

If amending or adding additional A attach additional sheets, if necessary	y). (Be specific)				
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			····		

	e date of each amendment this document was signed		06/04/2016	_, if other than the
	ective date <u>if applicable</u> :	06/04/2016		·—·
		(r	no more than 90 days after amendment file date)	
	e: If the date inserted in the ument's effective date on the contract of the c		not meet the applicable statutory filing requirements, this date will not be tof State's records.	e listed as the
Ad	option of Amendment(s)	(	CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap		y the members and the number of votes cast for the amendment(s)	
	There are no members or adopted by the board of o		tled to vote on the amendment(s). The amendment(s) was/were	
	06/04 Dated	/2016		
	Signature	mo	La Down togoth	_
	have r	not been select	vice chairman of the board, president or other officer if directors ed, by an incorporator – if in the hands of a receiver, frustee, or ed fiduciary by that fiduciary)	
	TI	MOTHY SEA	N FOGARTY	
		_ <del></del>	(Typed or printed name of person signing)	
	VI	CE PRESIDEI	NT OF LOCAL OUTREACH AND FUND RAISING	
	<del></del>		(Title of person signing)	