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Special Instructions to Filing Officer:						

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Revival Embassy			
	000003071			
DOCUMENT NUMBER:				
The enclosed Articles of Amend	ment and fee are subm	itted for filing.		
Please return all correspondence	concerning this matter	to the following:		
Darissa Parrott				
	(Name of Contact Pe	rson)	
Revival Embassy				
		(Firm/ Company)	
673 Potomac Station Drive NE	Suite 612			
		(Address)		
Leesburg, VA 20176				
	(City/ State and Zip C	Code)	
darissaparrott@gmail.com				
E-ma	il address: (to be used	for future annual rep	ort notification	
For further information concerni	ng this matter, please c	all:		
Darissa Parrott		at	904	635-6029
(Na	me of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	wing amount made pay	able to the Florida D	Department of S	tate:
_	\$43.75 Filing Fee & C Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)

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

REVIVAL EMBASSY, INC.

FILED

REVIVAL EMBASSY, INC.		2018 HAR - 1 AH IG: 50
(Name of Corporation as curren	tly filed with the Florida Dept. o	of State)
N14000003071		ALLANA JYE FLORID
(Document Number	er of Corporation (if known)	N. II
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Co</i>	rporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
Revival River, Inc.		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the ab	
B. Enter new principal office address, if applicable:	10 Pidgeion Hill Drive, Ste 80	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Sterling, VA 20165	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	673 Potomac Station Drive NE	
	Suite 612	
	Leesburg, VA 20176	
D. If amending the registered agent and/or registered office and/or the new registered office a Name of New Registered Agent:		name of the
	(Florida street a	uddress)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		tions of the position.
S	ignature of New Registered Agent	I, 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 <math>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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>enes</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change Add Remove		_		 -	
2) Change Add		_			
Remove 3) Change Add		_			
Remove 4) Change Add		-			
Remove 5) Change Add		_			
Remove 6) Change Add		_			
Remove					

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement of state's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the members and the number of votes cast for the was/were sufficient for approval.	ne amendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment adopted by the board of directors.	nt(s) was/were
2/26/2018 Dated	
Signature 2	
(By the chairman or vice chairman of the board, president or other offi have not been selected, by an incorporator – if in the hands of a receive other court appointed fiduciary by that fiduciary)	
Darissa Parrott	
(Typed or printed name of person signing)	
Treasurer	
(Title of person signing)	