# N10000007967

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Crowns Of Creation Ministries					
/ DOCUMENT NUMBER:					
The enclosed Articles of Amendment difference submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Joey Daddario					
(Name of Contact Person)					
Crowns Of Creation Ministries Corp					
(Firm/ Company)					
925 Tarpon Ave. Unit 8					
(Address)					
Fernandina Beach, FL. 32034					
(City/ State and Zip Code)					
joey@joeyandjeanie.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Joey Daddario 904-491-6540					
(Name of Contact Person) (Area Code) (Daytime Telephone Number)					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee □ \$43.75 Filing Fee &□ \$43.75 Filing Fee &□ \$52.50 Filing Fee X Certificate of Status Certified Copy					

**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



15 MAY 18 AM 9: 35

### Crowns Of Creation Ministries Corp.

## (Name of Corporation as currently filed with the Florida Dept. of)State N0000007967 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statute Florida Not for Profit Corporation dopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A \_ The new name must be distinguishable and contain the word "corporation" Incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent: N/A (Florida street address) New Registered Office Address N/A N/A , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. N/A Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title dname, 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. The 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 Child Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Titl</u> e	<u>Nam</u> e	Address
1) Change	SEC	Bill Scheff	91033 Fiddler Dr.
Add			Fernandina Beach, FL. 32034
X Remove			
2) Change	SEC	Thomas A. Daddario	1504 Drury Ct.
X Add	<del></del>		St. Augustine, FL. 32092
Remove			
3 ) Change	DIRECTOR	Frances A. Daddario PhD	10741 NW 18th St.
X Add			Plantation, FL. 33322
Remove			
4) Change	TREASURER	Michael M. Daddario	4023 Sickle Dr.
X Add	<del></del>		Hampstead, MD. 21074
Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s)</u> here				
(attach additional sheets, if necessary).	(Be specific)			
	<i>^</i> .			
	N/A			

	ach amendment(s) adopt <u>ion:</u>	N/A	, if other than the
date this document was signed		Date Signed (see be	low)
Lilective dati		days after amendment file date)	
	late inserted in this block does not meet the fective date on the Department of State's		ents, this date will not be listed as the
The amer	Amendment(s) (CHECK ON definition of the description of the descriptio		the amendment(s)
There	e are no members or members entitled to voted by the board of directors.	ote on the amendment(s). The ame	ndment(s) was/were
C	Dated 5/12/2015		
S	signature oe E. O	·ll	
		of the board, president or other office orporator – if in the hands of a receiv that fiduciary)	
	J	oey E. Daddario	
	(Typed	or printed name of person signing)	15 HAY
		PRESIDENT	1 8 m
		(Title of person signing)	