709553

(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MT. ZION	N DEVELOP	PMENTS, INC.
DOCUMENT NUMBER: 709553		
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Ralph M. Ross		
	(Name of Contact Person	1)
MT. ZION DEVELOPME	ENTS, INC.	
	(Firm/ Company)	
301 NW 9th Street		
	(Address)	
Miami,FL., 33136		
	(City/ State and Zip Cod	e)
historic@bellsout		
E-mail address: (to be use	d for future annual report	notification)
For further information concerning this matter, please	e call:	
Ralph M.Ross	at (305	379.4147
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:
■ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio	Address Iment Section on of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently fi	iled with the Florida Dept. of State)	<u> </u>
709553	,	CRE LAI
·		
·	ent Number of Corporation (if known)	<u> </u>
ursuant to the provisions of section 617.100	06, Florida Statutes, this Florida Not For Profit Corpora	tion adopts the foll
mendment(s) to its Articles of Incorporation	:	20
. If amending name, enter the new name	of the service stice.	[五]
if alliending name, enter the new name	or the corporation.	£.
	<u> </u>	Th
	e word "corporation" or "incorporated" or the abbrevio	ation "Corp." or "
Company" or "Co." may not be used in the	<u>e name.</u>	
. Enter new principal office address, if a	pplicable:	
Principal office address <u>MUST BE A STRE</u>	EET ADDRESS)	
Enter new mailing address, if applicab		
(Mailing address <u>MAY BE A POST OF</u>	FICE BUX)	
		<u> </u>
. If amending the registered agent and/o	r registered office address in Florida, enter the name	of the
new registered agent and/or the new re		
Name of New Registered Agent:		
Nume by New Registered Agent.		
New Registered Office Address:	(Florida street address)	
	(Florida street address)	
New Registered Office Address:	, Florida	
<u>New Registered Office Address</u> : 		(Zip Code)
_	(City)	(Zip Code)
ew Registered Agent's Signature, if chan	(City) nging Registered Agent:	
ew Registered Agent's Signature, if chan	(City)	

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 Do V Mike Jo SV Sally Sr	ones	·
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VC	Harold Dillard	301 NW 9th Street, Miami,FL., 33136
Add X Remove			
2) Change	VC	Walter Peterson	301 NW 9th Street, Miami,FL., 33136
X Add			
Remove 3) Change			
Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add			
Remove			
6) Change Add			
Remove			

If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)

The date	The date of each amendment(s) adoption: US/15/2013 iate this document was signed. Effective date if applicable:	
Effe		
	(no more than 90 days after amendment file date)	
Ado	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 entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	n 08/26/2013	
	Signature Signature	
	(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)	
	Ralph M. Ross	
	(Typed or printed name of person signing)	
	Chairman	
	(Title of person signing)	