713867

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	<u> </u>
(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: The True Ch	nurch of the Living God Inc. of Jacksonville, A.
DOCUMENT NUMBER: 713867	
The enclosed Articles of Amendment and fee are submitted	ed for tiling.
Please return all correspondence concerning this matter to	the following:
<u>Damian F</u>	1. Bell Sr.
(Na	une of Contact Person)
The True Church of the his	ring God Inc. of Jacksonville, A. (Firm/Company)
1405 West	State Street
	(Address)
<u>Jacksonville, 7</u>	Florida 32209
(Cit	y/ State and Zip Code)
Murse 9246 E-mail address: Nobe used for	gmail. Com (tuture annual report notification)
For further information concerning this matter, please call	
Gisela Simmons (Name of Contact Person)	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of State:
(,	43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status Additional copy is Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flori	da Dept. of State)		•
(Document Nu	unber of Corporation (if k	nown)	
Pursuant to the provisions of section 617,1006, Florida Suamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not F</i>	or Profit Corporation adopts the follo	owing
A. If amending name, enter the new name of the corpo	oration:		
			e new
name must be distinguishable and contain the word "corp" (Company" or "Co." may not be used in the name.	oration or incorporate	d" or the abbreviation "Corp." or "I	nc.
B. Enter new principal office address, if applicable:		: · E	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>:SS</u>)	18	
			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		# 30	
	.		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	Œ	lorida street address)	
		, Florida	
- -	(Ciţy)	(Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I at		t the obligations of the position.	
	Signature of New Regis	tered Agent 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 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: XChange X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change On A	rictor Dutread Ninistry	ch Leo Dawson	1405 W. State St. Jacksonville, Fl. 32209
Remove 2) Change	ire ctor Putre o Vinistry	ch Temisha Hill	1405 W. State St. Jacksonville, Fl. 32209
3) Remove	Executive Pastor	Leo Pawson	1405 W. State St. Jacksonville, A. 32209
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional sh		ticles, enter change(s) here: (Be specific)	
		-	

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The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.		, it valet man the
_	7 15 25	
Effective date <u>if applicable</u> :	7-15-25 (no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Departs	loes not meet the applicable statutory filing requirements, this date will not be ment of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
<i>A</i>
Dated July 15, 2025
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)
Derek C. Simmons
(Typed or printed name of person signing)
Vice President
(Title of person signing)