(Fi	Requestor's Name)		
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COVER LETTER

TO: Amendment Section Division of Corporations

Lighthouse Ministri	ies, Inc.			
738313				
		.		
The enclosed Articles of Amendment and fee are sub	bmitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
Steve Turbeville				
	(Name of Contact	Person)		
Lighthouse Ministries, Inc.				
	(Firm/ Comp:	my)	· - · · ·	
P. O. Box 3112				
	(Address)			
Lakeland, FL 33805				
	(City/ State and Z	ip Code)		
sturbeville@lighthousemin.org				
E-mail address: (to be use	ed for future annual	report notificat	ion)	
For further information concerning this matter, pleas	se call:			
Steve Turbeville		863 at	712-4503	
(Name of Contact Perso			(Daytime Telephone N	umber)
Enclosed is a check for the following amount made p	payable to the Florid	a Department	of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Ce y is Ce (Ac	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is iclosed)	
Mailing Address		Street Addres	- .	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

FILED

Articles of Incorporation

Lightnase M	of	2018 OCT 22 AM 5: 34 OF STATE OF HASSEE, FL
(Document Nur	nber of Corporation (i	(known)
Pursuant to the provisions of section 617,1006, Florida Stat amendment(s) to its Articles of Incorporation:	ates, this <i>Florida Not</i> .	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
NA		The new
N 1 + 1	ration" or "incorpora	ted" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u>NA</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	i
 If amending the registered agent and/or registered of new registered agent and/or the new registered offic 		ra, effer the name of the
Name of New Registered Agent	JIA	
New Registered Office Address:		(Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and acco	ept the obligations of the position.
	Signature of New Reg	gistered 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: X Change X Remove X Add	<u>V</u> <u>M</u>	ohn Doe ike Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	MICHAEL DOUGLAS	2514 CRES LAKE HILLS LP N
Add			LAKELAND, FL 33813
X Remove	D	ROBERT ZOLKOSKY	4618 REYNOSA DRIVE SW
2) Change Add			WINTER HAVEN, FL 33880
X Remove 3.) Change	<u>C</u>	ASHLEY TROUTMAN	633 W REMINGTON RD
X Add			LAKELAND, FL 33813
Remove 4) Change	D	DAVID ADAMS	924 HAMILTON PL DR
X Add			LAKELAND, FL 33813
Remove	D	BOB RELPH	4145 LAKELAND HILLS BLVD
X Add			LAKELAND, FL 33805
Remove	Ð	JEFF COOK	2604 HWY 92 E
6) Change X Add			PLANT CITY, FL 33566
Remove			

(attach additional sheets, if necessary) (the specific) N A	E. If amending or adding additional Articles, enter change(s) here.	
	(attach additional sheets, if necessary)— (Be specific)	
	NIA	
		_
		_
		_
		_
		_
		_
	_	

		ption:	, if other than the
late	this document was signed.		
Effe	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this block ument's effective date on the Department.	c does not meet the applicable statutory filing requirements, this date will nurtiment of State's records.	ot be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
2	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
	There are no members or members adopted by the board of director.	rs entitled to vote on the amendment(s). The amendment(s) was/were s.	
	Dated	5/2018 Aubuill	
	Signature) unbuilt	
	have not beer	inh or vice chairman of the board, president or other officer-if directors is selected, by an incorporator — if in the hands of a receiver, trustee, or spointed fiduciary by that fiduciary)	
		Here Turbeville	
		(Typed or printed name of person signing)	
	<i>_</i> _	resident/CEO (Title of person signing)	
		(Title of person signing)	