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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | of Apostles Inc. |
|---|--|
| DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee are s | submitted for filing. |
| Please return all correspondence concerning this m | natter to the following: |
| | Elder Roy Moreland |
| | (Name of Contact Person) |
| | Temple of Apostles Inc. |
| | (Firm/ Company) |
| | 3505 North Central Ave. |
| | (Address) |
| | Tampa . Florida 33603 |
| | (City/ State and Zip Code) |
| Pch | arlene57@yahoo.com |
| E-mail address: (to be u | nsed for future annual report notification) |
| For further information concerning this matter, ple | ase call: |
| Charlene Perkins | 727 873-8926 at |
| (Name of Contact Per | |
| Enclosed is a check for the following amount made | e payable to the Florida Department of State: |
| □ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of State | & \$\subseteq\$\$\$43.75 Filing Fee & \$\subseteq\$\$\$\$\$52.50 Filing Fee \text{Certificate of Status}\$\$\$\$(Additional copy is enclosed)\$\$\$\$\$\$\$\$(Additional Copy is Enclosed)\$\$\$\$\$\$\$ |
| Mailing Address | Street 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

Temple of Apostles Inc.

| (Name of Corporation as current | ly filed with the Florida Dept. of S | <u>State</u>) |
|--|---|------------------------------------|
| 745012 | | |
| (Document Number | r of Corporation (if known) | |
| Pursuant to the provisions of section 617.1006. Florida Statutes amendment(s) to its Articles of Incorporation: | s, this <i>Florida Not For Profit Corpo</i> | pration adopts the following |
| 4. If amending name, enter the new name of the corporation | on: | |
| Temple of the Apostles | Inc. | TL |
| name must be distinguishable and contain the word "corporati" "Company" or "Co." may not be used in the name. | on" or "incorporated" or the abbro | The new eviation "Corp." or "Inc." |
| 3. Enter new principal office address, if applicable: | 3505 North Central Ave | |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | Tampa , Fla. 33603 | |
| | | 2019 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | |
| | | |
| | | <u> </u> |
| D. If amending the registered agent and/or registered office | address in Florida anter the nex | <u> </u> |
| new registered agent and/or the new registered office ad | dress: | ne or the |
| Name of New Registered Agent: | N/A | |
| | (Florida street addre | ·ss) |
| New Registered Office Address: | | |
| | | . Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam | Agent: iliar with and accept the obligation | s of the position. |
| Sig | nature 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, 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>PT</u> <u>Y</u> <u>SV</u> | John Doe Mike Jon Sally Sm | n <u>es</u> | |
|----------------------------------|------------------------------|----------------------------------|-------------|-----------------|
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Addręs</u> s |
| 1) N/A Change | | | | |
| Add | | | | |
| Remove | | | | |
| 2) N/A Change | | - . | | |
| Add | | | | |
| Remove | | | | |
| 3) N/A Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) N/A Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) N/A Change | | - | | |
| Add | | | | |
| Remove | | | | |
| 6) N/A Change | | | | a. / |
| Add | | | _ | |

| | change(s) here | .• | | | |
|--|----------------|--------------|-------------|---------------|-------------|
| (attach additional sheets, if necessary). (Be speci, | ific) | | | | |
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| | April 23, 2019 | |
|-------------|--|-------------------|
| | ate of each amendment(s) adoption: | if other than the |
| date | his document was signed. | |
| Effe | tive date <u>if applicable</u> : | |
| | (no more than 90 days after amendment file date) | |
| Not doct | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be nent's effective date on the Department of State's records. | pe listed as the |
| Ado | tion 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. | |
| | Dated April 23, 2019 | |
| | Signature Roy Mansland | |
| | (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) | _ |
| | Elder Roy Moreland | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |