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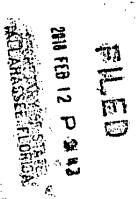
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: Westgate Tab	ernacle, Inc					
DOCUMENT NUMBER: _	759783						
The enclosed Articles of Ame	ndment and fee are sub	mitted for filing.					
Please return all corresponder	nce concerning this matt	er to the following:					
	Arnold M.	Straus, Jr.					
		Name of Contact Person					
Straus & Eisler, PA							
Firm/ Company							
10081 Pines Blvd., Suite C							
Address							
, 	Pembroke Pines, FL 33024						
		City/ State and Zip Code	;				
		ronniegmiami@rocke	tmail.com				
	-mail address: (to be us	ed for future annual report	notification)				
For further information conc	erning this matter, pleas	e call:					
Joanne M. Cur	ran	954at (431-2000				
Name of Con	tact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for the f	ollowing amount made	payable to the Florida Depa	irtment of State:				
☐ \$35 Filing Fee ☐	3\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Division o P.O. Box	nt Section of Corporations	Amend Division Cliftor 2661 I	Address Iment Section on of Corporations on Building Executive Center Circle assec, FL 32301				

Articles of Amendment to Articles of Incorporation of

WESTGATE TABERNACLE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 759783 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The Gate International, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) 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 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, 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	PT Joh	nn Doe					
X Remove	<u>y</u> <u>Mil</u>	Mike Jones					
_X Add	<u>SV</u> <u>Sal</u>	ly Smith					
Type of Action (Check One)	Title	Name	<u>Addres</u> s				
l) Change	Director	Laura Mibonard	1700 suwance DR.				
Add			WEST PAIN BEACH				
Kemove			33409				
2) Change		*					
Add							
Remove							
3) Change							
Add			•				
Remove							
4) Change							
Add							
Remove							
5) Change							
Add			1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940				
Remove							
6) Change							
Add							
Remove		•					

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
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	·····		
f an amendment provides for an excl	ange, reclassification, or c	ancellation of issued ska	res.
<u>provisions for implementing the ame</u>	idment if not contained in	the amendment itself:	L
(if not applicable, indicate N/A)			
<u> </u>			
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