

F100000002064

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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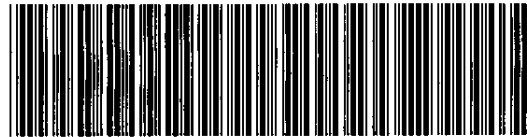
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
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DIVISION OF CORPORATIONS  
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@ 6/14/11

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Trails of Faith Ministries, Inc  
Name of Corporation

DOCUMENT NUMBER: FI 000000 2064

Please return all correspondence concerning this matter to the following:

Julie Rhodenizer  
Name of Contact Person

Trails of Faith Ministries Inc  
Firm/Company

14276 SR 51 P.O. Box 1390  
Address

Live Oak FL 32060  
City/State and Zip Code

julierhodenizer@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Rhodenizer at ( 404 ) 403-1257  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$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)

*ck already  
sent*

**Mailing 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 6, 2011

JULIE RHODENIZER  
TRAILS OF FAITH MINISTRIES, INC.  
14276 SR 51  
LIVE OAK, FL 32064

SUBJECT: TRAILS OF FAITH MINISTRIES, INC.  
Ref. Number: F10000002064

We have received your document for TRAILS OF FAITH MINISTRIES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 511A00013810

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**Certificate of Corporate Resolution  
By Faith Ministries, Inc.  
dba Trails of Faith Ministries, Inc.**

I, Julie S. Rhodenizer, Secretary of By Faith Ministries, do hereby certify that a duly constituted meeting of the Directors of the Corporation held at the office of the Corporation on May 29, 2011, it was upon motion duly made and seconded, that it be VOTED: To change the name of the Florida non-profit corporation from Trails of Faith Ministries, Inc. to Wholly His, Inc.


It was upon further motion made and seconded that it be further VOTED: Carl G. Rhodenizer, Jr, President; and/or Julie S. Rhodenizer, Secretary/Treasurer, in their respective capacities as Directors of the Corporation are empowered, authorized, and directed to make said change.

I further certify that the foregoing votes are in full force this date without rescission, modification, or amendment

Dated this 30th day of May 2011

A TRUE RECORD

ATTEST

  
Julie S. Rhodenizer  
Secretary/Treasurer

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