

L110000054240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

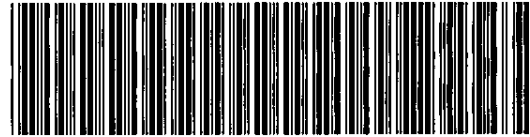
Special Instructions to Filing Officer:

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L. SELLERS

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12 FEB -8 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SOVEREIGN WORLD MINISTRY LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

V. LESLIE BERKELEY
Name of Person
SOVEREIGN WORLD
Firm/Company
2500 CALABRIA AVENUE
Address
DAVENPORT FL. 33897
City/State and Zip Code
wersovereign@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

V. LESLIE BERKELEY at (407) 219 6499
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 19, 2012

V. LESLIE BERKELEY
2500 CALABRIA AVENUE
DAVENPORT, FL 33897

SUBJECT: SOVEREIGN WORLD LLC
Ref. Number: W12000003450

We have received your document for SOVEREIGN WORLD LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 812A00001355

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SOVEREIGN WORLD MINISTRY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5/09/2011 and assigned
Florida document number L11000054240.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SOVEREIGN WORLD LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2500 CALABRIA AVENUE
DAVENPORT FLORIDA
33897

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. On if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

FILED
2 FEB - 2011
TALLAHASSEE
FLORIDA
SECRETARY OF STATE

If amending the Manager or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

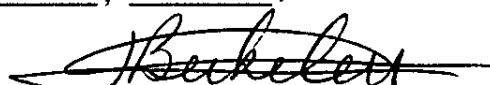
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____,



 Signature of a member or authorized representative of a member
 V. LESLIE BERKELEY

 Typed or printed name of signee

12 FEB - 8 PM 12:02
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED