# 150000993

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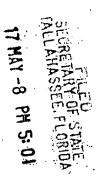
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MAY 1 0 2017 S. YOUNG



# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 42417 and assigned Florida document number 15000129193  This amendment is submitted to amend the following:  ELLA WILLIAMS  Name of Person
ELLA WILLIams
Name of Person
^ ·
GOSPEL WORLS NOWS LLC. Firm/Company
Box 903 Address
City/State and Zip Code
City/State and Zip Code  Conversion Company Code  E-mail address: (to be used for future annual) report notification  For further information concerning this matter, please call:
For further information concerning this matter, please call:
Name of Person at (Sec.) 257-5302  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$\sum_{\text{\texiclex{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\t

Certified Copy

(additional copy is enclosed)

# MAILING ADDRESS:

Certificate of Status

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

### STREET/COURIER ADDRESS:

Certificate of Status & Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **COVER LETTER**

TO: Registration Section  Division of Corporations
SUBJECT: GOS POL WOOLD - Nums 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:
A. If amending name, enter the new name of the limited liability company here:
The Gospel works WE
The new name must be distinguishable and contain 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) AUDA PANC PL
33826
Enter new mailing address, if applicable: 206 Toe Hithor Street 5
(Mailing address MAY BE A POST OFFICE BOX) AVON YOUR R 3380 5
7
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:
2 o
Name of New Registered Agent:
New Registered Office Address:  Enter Florida street address
Florida
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 605, F.S. Or, 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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	Ianager Luthorized Member		
<u>Title</u>	Name	Address	Type of Action
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Effective date, if o	ther than the da	te of filing:				_ (optional	<b>`</b>	
f an effective date is li Note: If the date in	sted, the date must be	specific and can	not be prior to d	ate of filing or	more than 90	days after filing	g.) Pursuant to 60	
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Dated	1971/	, _		•				
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Filing Fee: \$25.00