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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: All Na	tions New Testament	Church of God Fo	ellowship _t	INC .	
DOCUMENT NUMBER:	566				
The enclosed Articles of Amendment ar	d fee are submitted fe	or filing.			
Please return all correspondence concert	ning this matter to the	following:			
Evan Grant					
	(Name	of Contact Person	1)		
All Nations New Testament Church of C	God Fellowship 、\	CC.			
	(Fi	rm/ Company)			
4351 W Oakland Park Blvd					
		(Address)			
Lauderdale Lakes, Fl 33313					
	(City/ S	tate and Zip Code	:)		
egrant103@aol.com					
E-mail addres	ss: (to be used for futt	ire annual report r	notification	1)	
For further information concerning this r	natter, please call:				
Evan Grant		954 at	1	3947839	
(Name of Co	ontact Person)		ea Code)	(Daytime Telephone Number)	
Enclosed is a check for the following an	ount made payable to	the Florida Depa	rtment of	State:	
■ \$35 Filing Fee □\$43.75 F Certifica	te of Status Certi	5 Filing Fee & fied Copy itional copy is sed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		Street 2	Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ALL NATIONS NEW TESTAMENT CHURCH OF GOD FELLOWSHIP, INC.

(Name of Corporation as currently filed with the Florida	Dept. of State)	
N0000	0000566	
(Document Numl	ber of Corporation (if k	mown)
Pursuant to the provisions of section 617,1006, Florida Statu- amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
		The new
name must he distinguishable and contain the word "corpord" (Company" or "Co." may not be used in the name.	ttion" or "incorporated	d" or the abbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>		202 17.A.1
		TO LAT
		· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2 P
		= ± (
		3: Q4
		•
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office:		, enter the name of the
new registered agent and/or the new registered office	augress:	
Name of New Registered Agent:		
New Registered Office Address:	AF.	lorida street addressi
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	l Agent:	
I hereby accept the appointment as registered agent. I am fa		the obligations of the position.
	Samanusa of Many Pagist	ered 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	$\underline{V} = \underline{Mik}$	<u>n Doe</u> e <u>Jones</u> y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	V	Krista-Gaie Grant	4470 Coral Springs Drive Coral Springs, Fl 33065
Remove			
2) Change Add			
Remove			
4) Change Add			
Remove			
5) Change Add		-	
Remove			
6) Change Add			
E. If amending or additional sh	ding additional A	Page 2 of 4 Articles, enter change(s) here: (Be specific)	
	, .		

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		-	-	· -
		Page 3 of 4		
	12/26/2019			
The date of each amendment(s) adoption date this document was signed.	:			if other than the
12/26/2019				
Effective date <u>if applicable</u> :	no more than 90 de	ays after amendmen	t file date)	·
				211 - 11 - 22 - 1 - 2
Note: If the date inserted in this block does document's effective date on the Department	s not meet the appli at of State's record	icable statutory tilin ls.	g requirements, this date	viii not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(<u>CHECK ONE</u>)

Adoption of Amendment(s)

Dated	
Signatur	· HACLAT
	(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)
	oner court appointed redocally by mai tradeally)
	Bishop Evan Grant
	Bishop Evan Grant (Typed or printed name of person signing)
	· · · · · · · · · · · · · · · · · · ·