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C. GOLDEN

DEC 20 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SHEKINAH GLORY DELIVERANCE MINISTRIES, INC.

DOCUMENT NUMBER: N00000001360

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DR. BARBARA GIBSON

(Name of Contact Person)

SHEKINAH GLORY DELIVERANCE MINISTRIES, INC.

(Firm/ Company)

601 GLENWOOD LANE

(Address)

PLANTATION, FLORIDA 33317

(City/ State and Zip Code)

drbgibson@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DR. BARBARA GIBSON

at

954

646-7110

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|--|--|---|---|

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

October 11, 2017

DR. BARBARA GIBSON 2ND MAILING
601 GLENWOOD LANE
PLANTATION, FL 33317

SUBJECT: SHEKINAH GLORY DELIVERANCE MINISTRIES, INC.
Ref. Number: N00000001360

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 317A00015625

RECEIVED
17 NOV 30 PM 2:00
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 2, 2017

DR. BARBARA GIBSON
POST OFFICE BOX 802024
MIAMI, FL 33280-2024

SUBJECT: SHEKINAH GLORY DELIVERANCE MINISTRIES, INC.
Ref. Number: N00000001360

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 317A00015625

RECEIVED
17 OCT 10 PM 12:15
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

SHEKINAH GLORY DELIVERANCE MINISTRIES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N00000001360

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

NOT APPLICABLE

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1055 N.W. 62ND ST

MIAMI, FL 33150

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 802024

MIAMI, FL 33150

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:

DR. BARBARA GIBSON

601 GLENWOOD LANE

(Florida street address)

New Registered Office Address:

PLANTATION

(City)

Florida 33317

(Zip Code)

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 position.

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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--------------------------------------|--------------|-------------|----------------|
| 1) <input type="checkbox"/> Change | _____ | _____ | _____ |
| <input type="checkbox"/> Add | | | _____ |
| <input type="checkbox"/> Remove | | | _____ |
| 2) <input type="checkbox"/> Change | _____ | _____ | _____ |
| <input type="checkbox"/> Add | | | _____ |
| <input type="checkbox"/> Remove | | | _____ |
| 3) <input type="checkbox"/> Change | _____ | _____ | _____ |
| <input type="checkbox"/> Add | | | _____ |
| <input type="checkbox"/> Remove | | | _____ |
| 4) <input type="checkbox"/> Change | _____ | _____ | _____ |
| <input type="checkbox"/> Add | | | _____ |
| <input type="checkbox"/> Remove | | | _____ |
| 5) <input type="checkbox"/> Change | _____ | _____ | _____ |
| <input type="checkbox"/> Add | | | _____ |
| <input type="checkbox"/> Remove | | | _____ |
| 6) <input type="checkbox"/> Change | _____ | _____ | _____ |
| <input type="checkbox"/> Add | | | _____ |
| <input type="checkbox"/> Remove | | | _____ |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

ARTICLE VIII The daily affairs of the Corporation are to be managed by the Minister, also known as the Senior
Pastor, who serves as such, or a person designated by him to assist in the management of the
Corporation. The Executive Board of Directors voted and unanimously approved Assistant
Pastor Mangaliso Gibson as the Senior Pastor of the Corporation.

ARTICLE IX The Minister, also known as the Senior Pastor, shall serve as Minister, also known as
Senior Pastor, and Officer of the said Corporation.

ARTICLE XII The property of this Corporation is irrevocably dedicated to religious purpose that serves to
benefit the membership and the community it ministers to. This is inclusive of all revenue;
furnishings; equipment; books and other literature; plaques, awards and certificates;
clergy apparel; and any items specified as purchased or owned by the Corporation. Any
assets, inclusive of revenue and/or property, can be disbursed as necessary, per Board
approval. Upon dissolution of the Corporation, assets shall be distributed for one or more
exempt purposes within the meaning of section 501(C)(3) of the Internal Revenue Code or
corresponding section of any future federal tax code, or shall be distributed to the Federal,
state or local government for public purpose. Any such assets not so disposed of shall be
disposed of by the Court of Common Pleas of the county in which the principal office of
the organization is then located, exclusively for such purposes.

ARTICLE XIII In the event of the Senior Pastor's dismissal, resignation, demise or any other reason that he/she
is unable to perform the duties of his/her office, it becomes the responsibility of the Chief
Apostle to appoint an Interim Pastor or Senior Pastor to said ministry. If one is not appointed,

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ARTICLE XIII CONT'D.

the Chief Apostle will assume the role of Senior Pastor of the Shekinah Glory
Deliverance Ministries, Inc.

JULY 9, 2017

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

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

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated NOVEMBER 12, 2017 _____

Signature Dr. Barbara Gibson
(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)

DR. BARBARA GIBSON

(Typed or printed name of person signing)

DIRECTOR, TREASURER.

(Title of person signing)