N0000001590

(Re	equestor's Name)		
(Address)			
(Ac	ldress)		
(Čit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	ısiness Entity Naı	me)	
(Do	ocument Number))	
Certified Copies	_ Certificate:	s of Status	
Special Instructions to Filing Officer:			

. ;

Office Use Only



000212268160

09/19/11--01020--021 **52.50

oct 3,2011

SECRETARY OF STATE DIVISION OF CORPORATION

Amend Manch 8 Ca apolli

COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPORATION: New Zior	International M	linistries Inc
DOCUMENT NUMBER: N 000000015	590	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Tangerine Hope (Name of	Contact Person)	
New Zion Interne		_
5860 N.W. 6th St.	Address)	
Ocala, FL 3	1448 Z te and Zip Code)	
drtkhope & yahoo	d for future annual report notification	on)
For further information concerning this matter, please		
Tangerine Hope (Name of Contact Person)	at (<u>864</u>) <u>742 –</u> (Area Code & Daytime	8.3109 Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Department o	f State:
\$35 Filing Fee \$\times \text{Status}\$ \$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	,

2661 Executive Center Circle Tallahassee, FL 32301

EFFECTIVE DATE

OCH 3,2011

Articles of Amendment to Articles of Incorporation

New Zion International	Ministries Inc.		
(Name of Corporation as currently	filed with the Florida Dept. of S	<u>State</u>)	
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Floric the following amendment(s) to its Articles of Incorporate the following amendment the following ame		Profit Corporation add	pts
A. If amending name, enter the new name of the	corporation:		
Kingdom Hope Intern	ational Ministric	es Inc.	
The new name must be distinguishable and contain abbreviation "Corp." or "Inc." "Company" or "Co	1 the word "corporation" or "ir	acorporated" or the	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	le:		DIVISI
<u></u>		SEP	碧
			F COT
C. Enter new mailing address, if applicable:		7	SECRETARY UPOR ATIONS VISION OF CORPOR ATIONS VISION OF CORPOR ATIONS
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u> </u>		5: 2:
			ر, نی
D. If amending the registered agent and/or registered		nter the name of the	
new registered agent and/or the new registered	office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)		
		. Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Re			
I hereby accept the appointment as registered ager position.	nt. I am familiar with and acc	ept the obligations of	the

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>D</u>	Betty Alex	1507 S.W. 4th S- Ocala, FL 344	├── □ Add ፲ /
(attach ada	ing or adding additional Articles, enditional sheets, if necessary). (Be s	ner change(s) here. Decific)	

7.77			

The date of each amendment(s) adoption: September 12, 2011
Effective date if applicable: OCTOBET 3, 201
(no more than 90 days after amendment file date)
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.
Signature Angle Haw Signature Angle Signature Angle Signature Angle Signature Angle Signature Angle Signature Angle Signature Signature Angle Signature Angle Signature Angle Signature Signature Angle Signature Angle Signature Signature Angle Signature Signature Angle Si
(Typed or printed name of person signing)
(Title of person signing)