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2021 SEP -9 AM 5: 48

COVER LETTER

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TO: Amendment Section Division of Corporations	/			
NAME OF CORPORATION	n: <u>Kintabon</u>	1 NOW	APOSTOL	ic CENTER, IM
DOCUMENT NUMBER:	NO OOC	0001	590	
The enclosed Articles of Amer	ndment and fee are subm	itted for filing.		
Please return all corresponden	ce concerning this matter	to the following	; :	
- RHO,	NOA GAR	DNER		
/	(Name of Contac	t Person)	
KINGDOM	NOW AP	OSTALIC	CENT	ER, INC
		(Firm/ Comp	any)	
1416 S. t	TIAWASSE	EE R	D #//	12
		(Address	r	
[DRLANDO	The s	32835	_	
	(0	City/ State and Z	ip Code)	
Kino				gmad. com
For further information concer-			•	, •
\bigcirc 1	GARDNE	an. R	. (407)	406-6591
(N	ame of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the foll	owing amount made pay	able to the Florid	la Department of S	State:
\$35 Filing Fee	1\$43.75 Filing Fcc & ☐ Certificate of Status	3\$43.75 Filing F Certified Copy (Additional copenclosed)	Y Certific y is Certific	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Add Amendment			Street Address Amendment Section	
Division of C			Amenament Section Division of Corpor	
P.O. Box 632			The Centre of Ta	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

	Articles of Amendment	FILED
	Articles of Incorporation	מונות משלות היים
KINGSOM NOW	APOSTOLIC CEN	2021 SEP -9 AM 5: 48 TER SEAL FARY OF SHALL
(Name of Corporation as currently filed with the)	Florida Dept. of State)	r milenimideeri
	100001590	
(Docume	nt Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Profit Co	prporation adopts the following
A. If amending name, enter the new name of the	corporation:	
KINGDOM N	aw CHURCH IN	C Thu manu
name must be distinguishable and contain the word '	"corporation" or "incorporated" or the ai	bbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	11111 0 11	~ D/4
B. Enter new principal office address, if applicable	14/6-8 H1	HWASSEE KA#112
(Principal office address MUST BE A STREET AD		32835
	,	_ :
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	ox 14165, HiA	WA SSEE RO#112
	ORLANDO, FC	32835
D. If amending the registered agent and/or registe	ered office address in Florida, enter the	name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent:	1/1/A	
_	/0//	
New Registered Office Address:	(Florida street a	aaress)
	MA	. Florida
_	(City)	(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.

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: XChange X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change Add		MA	
Remove			
2) Change Add			
Remove 3) Remove 4 Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove		MIA	
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
		Λ Λ	
		<u> </u>	
		VIII	
	·		

	NA	
	08-01-202	
The date of each amendment(s) add date this document was signed. Effective date if applicable:	option: 08-01-2-02 08-01-2-02 (no more than 90 days after amendment file date)	if other than the
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable statutory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add	opted 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 <u>08-01-202</u>				
Signature Mudd Mandride				
(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)				
RhonDA GARDNER				
(Typed or printed name of person signing)				
DIRTCIOR, SECRETARY				
(Title of person signing)				