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C. LEWIS AUG-9 2013 EXAMINER

COVER LETTER

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

Division of Corporations	414	#1	.44	,A-1,
NAME OF CORPORATION: Hidden SEED Kingdom DEVElop	oment	Cen	ler,	INC.
DOCUMENT NUMBER: NODOOOO6971			 -	
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
ENOLAM. Goodman				
(Name of Contact Person)		,		
(Firm/ Company)	. <u> </u>		- <u>-</u> -	_
10453 GREENVILLE ROAD				
(Address)	_			_
JACKSONVILE, F1. 32256				_
(City/ State and Zip Code)				
enolagood mana bellsouth net Jemail address: (to be used for future annual report notification	on)		_	
For further information concerning this matter, please call:	J,			
Sharan W. Bowens at 904, 91	10-7	203	3	
(Name of Contact Person) (Area Code & Da	ytime Tele	phone N	lumber)	l
Enclosed is a check for the following amount made payable to the Florida Department o	f State:			
Certificate of Status Certified Copy Cert (Additional copy is Cert enclosed) (Add	.50 Filing I ificate of S ified Copy ditional Co closed)	tatus		

Street Address

Clifton Building

Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Arricles of Amengment to

FILED

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* · · · · · · · · · · · · · · · · · · ·	Articles of Incorporation	13 AUG -6 PM 1:
Hidden SEEd Kingdo	m Development	Centagi Final OF STA
(Name of Corporation as currently filed	with the Florida Dept. of State)	FLOR
N00000000000011		
(Document)	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, F amendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florida Not For F</i>	Profit Corporation adopts the following
A. It amending name, enter the new name of the NEW BREEN CLEATED name must be distinguishable and contain the we "Company" or "Co." may not be used in the na	ord "corporation" or "incorporated"	
b. Enter new principal office address, it applies (Principal office address MUST BE A STREET		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)	
D. If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent:		ter the name of the
New Registered Office Address:	(Florida street address)	
	(City)	, 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.

Signature of New Kegisterea Agent, if changing

in aittending 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 neta. 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: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	Name	Address
1) Khange	$\frac{\mathcal{P}}{\mathcal{P}}$	ENOIA M. Goodman	10453 GREENVILLE ROAD JACKSONU: 11E, Fl 32256
Add			JACKSDAVINE, FI 32256
Remove 2) Add		June P. Jones	1325 Cornleyeide Blud, Delando, FL 32835
Remove 3) Change Add	T	ERAKAL GOODMAN	12 Pinto Lane Palm Coast, Fl 32/4
Remove 4) Change Add	5	Sharon W. Bowens	11054 N. CAMPUS Blud. JACKSONVILLE, FL 32218
Remove 5) Change Add Remove	<u>5T</u>	ElEcia Goodman	4435 Kenndle Rdi JACKSONVILLE, Fl 32208
6) Change Add Remove	TD	ERAKAI Shuler	12 Pinto Lane Palm Coast, Fl 32164

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Change statement: The Pastor along with the Board and officers agree to the Rhythm of Holy Spirit and His leading to change the name of
Board and officers agree to the Rhythm of Holy
Spirit and His leading to change the name of
the minister to postert a male inclusion
appearance and name to draw more of His young souls to the Kingdom to serve Him, We are determined to impact this generation, and generations to come as He leads us to
Young souls to the Kingdom to selve Himi
WE are determined to impact this generalian
and generalions to come as He leads us to
our destiny.

The daté of each amendment(date this document was signed.	s) adoption: May 4, 2	0/3	FILE other than the
Effective date <u>if applicable</u> :	August 1, 2013	3 13	AUG -6 PM 1:12
	√ (no more than 90 days after amendal)	dment file date) SEC TALL	RETARY OF STATE AHASSEE, FLORIDA
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		ж т соқұрд
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of proval.	f votes cast for the amen	ndment(s)
There are no members or adopted by the board of d	members entitled to vote on the amendment(s) irectors.	. The amendment(s) wa	ns/were
Dated <u>Al</u>	gust 1,2013		
Signature	nala m. Comma		
have n	chairman or vice chairman of the board, presi- ot been selected, by an incorporator – if in the ourt appointed fiduciary by that fiduciary)		
EN	OIA M. Goodman	7	
PRE	(Typed or printed name of person signing)	ng)	
	(Title of person signing)		