N00679

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COVER LETTER

TO: Amendment Section Division of Corporations AGAPE FAITH CENTER MINISTRIES, INCORPORATED NAME OF CORPORATION: DOCUMENT NUMBER: NOO679 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARVENELLE W. GARVIN
(Name of Contact Person) AGAPE FAITH CENTER MINISTRIES, INCORPORATED
(Firm/Company) 936 N.W. 31st AVENUE GA(NESVILLE, FL. 32609 (City/State and Zip Code) CHEE 866 @ AUL. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARVENELLE W. GARVIN at (352) 871-4401
(Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to

Articles of Incorporation

FILED

AGAPE FAITH CENTER MINISTRIES, 2018 RPORATED (Name of Corporation as currently filed with the Florida Dept. of State ARY OF STATE NOO 679 (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:

ne new name must be distinguishable a breviation "Corp." or "Inc." <u>"Compan</u>		
Enter new principal office address, it rincipal office address <u>MUST BE A ST</u>		
Enter new mailing address, if applic (Mailing address <u>MAY BE A POST O</u>		
	 	
If amending the registered agent and new registered agent and/or the new		orida, enter the name of th
		orida, enter the name of th
new registered agent and/or the new		
new registered agent and/or the new Name of New Registered Agent:	registered office address:	

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)

Title	<u>Name</u>	Address	Type of Action
70_	BEATRICE K. LONG	1534 S.E. 122 AVE GAINESVILLE, FA	
SD	TRADINAL. Thomas	115 NE 212 Course VILLE, FL.	Add Remove
PD	MARVIN W. GARVIN	CAINESVILE, FL.	
	ling or adding additional Articles, enter	- · · · · · · · · · · · · · · ·	
	IN MARVIN W. 13		or it
	LA BE' GARVIN MA PLEASE ADMEN		
PD 1	MARVENELLE W. GA		SW 8 AVE. VILLE, FL. 32607
D	EUGENE P. GARVIN		SW 8th AVE
2 <u>n</u>	1/105 1.) A.ChT		SVILLE, FL. 32607
<u>ע</u> כ	ALICE WRIGHT	- 23113 S HIGH S	. <u>U.S. H</u> WY 441 PRINGS, FL. 32643
DE	BERT BEASLEY	- 712 N.W.	94 TERRI
	l	GAINESV.	(LLE, FL. 32607

The date of each amendment(s) adop	
Effective date <u>if applicable:</u>	(date of adoption is required) 9-20-20
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were
Dated 9-20	0-2011
Signature Ma	wenelle M. Harry
have not be	rman or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
$\underline{\mathcal{M}}$	(Typed or printed name of person signing)
·	Registered Agent, President