## N01000000353

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☐ PICK-UP ☐ WAIT ☐ MAIL	
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(Business Entity Name)	
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## **COVER LETTER**

Mailing Address Street Address				
Certificate of Status  (Additional copy is Certified Copy enclosed)  Certificate of Status Certified Copy (Additional Copy is Enclosed)				
□ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
(Name of Contact Person) (Area Code & Daytime Telephone Number)				
Linda Lancaster at (386) 916-9193				
For further information concerning this matter, please call:				
E-mail address: (to be used for future annual report notification)				
1 (				
Keystone Helghots FL 32656 (City/State and Zip Code)				
(Address)				
P.O. Box 2047				
Rohi Deliverance Church, Inc. (Firm/Company)				
Austin Lancaster or Linda Lancaster (Name of Contact Person)				
Please return all correspondence concerning this matter to the following:				
The enclosed Articles of Amendment and fee are submitted for filing.				
DOCUMENT NUMBER: <u>NO100000353</u>				
NAME OF CORPORATION: Rohi Deliverance Church, Inc.				
Division of Corporations				
TO: Amendment Section				

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

	Articles of Incorporation	FILED.
$\mathfrak{D}$ 1. $\mathfrak{N}$ 1.	of	
Mohi Beliverance	e Church	THETH OEC 16 PH 4: 27
(Name of Corporation as currently filed wi	th the Florida Dept. of State)	LUGU DE STATE,
NOLDODODO	353	FYTE THASSEE, FLORIDA
(Document Nu	mber of Corporation (if known)	(Dec
Pursuant to the provisions of section 617.1006, Flor	ida Statutes, this Florida Not Fo	r Profit Corporation adopts the following
amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the	corporation:	,
シン・トー ナー	( ) _ /	Ministra
name must be distinguishable and contain the word	ernation" or "incompand	d" or the abbreviation (Corn " or "Inc "
"Company" or "Co." may not be used in the name		2 of the appreviations Corp. of the.
	111 0 1	the Fact 14th Lane
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.		The Lust 11
(27 mesper office address programmy and programmy	(Jaines	sville, th 3260
		9
C. Enter new mailing address, if applicable:	· P 0 1	20x 2047
(Mailing address <u>MAY BE A POST OFFICE I</u>	$\frac{1}{1}$	
	neusti	one Heights,
	1	32.65b
	<del></del>	<u> </u>
D. If amending the registered agent and/or regis		enter the name of the
new registered agent and/or the new register	ed office address:	
Name of New Registered Agent:	1///	
/	\	
<del></del>	(Florida street address)	<del></del>
New Registered Office Address:	1 / / /	
		, Florida
	(Ćity)	(Zip Code)
New Registered Agent's Signature, if changing R	legistered Agent:	
I hereby accept the appointment as registered agen		t the obligations of the position.
Signatu	re of New Rebistered Agent if c	hanaina

Page 1 of 4

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			IV/A	7
			irst 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, Treasure	r, Direct	or would i	Syricer. If an oyricer/airector notas more ind be PTD.	in one title, list the first letter of each office
Changes should be noted a change, Mike Jones lea	in the fo	llowing m	anner. Currently John Doe is listed as the l n. Sally Smith is named the V and S. These s	PST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,
Mike Jones, V as Remove	, <u>an</u> d Sal	ly Smith,	SV as an Add.	
Example:				
X Change	PT	John Do		
X Remove	<u>V</u>	Mike Jo		
X Add	<u>SV</u>	Sally Sn		
Type of Action	<u>Title</u>		Name	<u>Addres</u> s
(Check One)				
1) Change		_		
Add				
Remove				
2) Change				
2) Change		<del></del>		
Add				
Remove				
3) Change	·	_	······································	
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5) Change	<u> </u>			
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Remove				
6) Change		-		
Add				

Remove

(attach additi	or adding additional An onal sheets, if necessary).	(Be specific)	////	7	
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The date of each amendment(s) add	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)	
There are no members or members	ers entitled to vote on the amendment(s). The amendment(s) was/were	
adopted by the board of director	3.	
Dated 2	Vin Lancaster	
	nan or vice chairman of the board, president or other officer-if directors	
	selected, by an incorporator - if in the hands of a receiver, trustee, or	
other court ap	opointed fiduciary by that fiduciary)	
Aust	in Lancaster	
€ (	Typed or printed name of person signing)	
	esident	
	(Title of person signing)	