

(Reque	stor's Name)			
(Addres	ss)			
(Addres	ss)			
(City/St	ate/Zip/Phone #)		
PICK-UP	WAIT	MAIL		
(Busine	ess Entity Name)	,		
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filin	ng Officer:			

Office Use Only



400317443174

08/24/18--01005--017 **35.00

2018 AUG 24 AM 9: 05 SECRETARY OF STATE TALLAHASSEE, FI

R. WHITE AUG 2 8 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	I AM BORN AGAIN DN:	MINISTRIES, INC.	
;	N01000001257		
DOCUMENT NUMBER: _			
The enclosed Articles of Amo	endment and fee are subm	itted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
Melody Ritchie			
	(Name of Contact Perso	n)
		(Firm/ Company)	
P O Box 753			
		(Address)	
Micanopy, Fl. 32667			
·-	(City/ State and Zip Cod	e)
melody.ritchie@yahoo.com			
E-	mail address: (to be used	for future annual report	notification)
For further information conce	erning this matter, please o	all:	
Melody Ritchie		35 at	2-514-3560
	Name of Contact Person)	(Aı	rea Code) (Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & € Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing A			Address

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 of

FILED

2018 AUG 24 AM 9: 05

I AM BORN AGAIN MINISTRIES, INC.

NISTRIES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State SECRETARY OF STATE TALLAHASSEE, FL N01000001257 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc," "Company" or "Co." may not be used in the name B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: _, Florida _ (Zip Code) (City) 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 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)

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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> <u>e Jones</u> y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Harrell Hemingway	P O Box 525
X Add			Micanopy, FL 32667
Remove			
2) X Change	D	Lolita Hemingway	P O Box 525
Add			Micanopy, FL 32667
Remove			
3) Change			
Add			
Remove			
4) Change		·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

August 20, 2018	
The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
August 20, 2018 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
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 (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)	_
Melody Ritchie	
(Typed or printed name of person signing)	
Treasurer	
(Title of person signing)	