ND1000001905

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(Cit	ty/State/Zip/Phone	• #)
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TALLAHASSEE, FLOR

Amendalio

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Palm Beach	h Sanctuary of Praise	
DOCUMENT NUMBER: NO100000290)5	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
	LIAM STROTHER	
(Nam	ne of Contact Person)	
- Palm Bea	ch Sanctuary of Praise	
. (1	Firm/ Company)	
166	60m Quail Drive 710 High la	of Drive
	(Address)	
	m Beach,Florida 3 3409 334	05
(City/	State and Zip Code)	
	ctofpraise@att.net	ation)
For further information concerning this matter, p	·	
William Strother	at (561) 267-088	0
(Name of Contact Person)	(Area Code & Daytin	ne Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida Department	of State:
	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section	
Division of Corporations	Division of Corporatio	ns
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

Palm Beach Sanctuary of Praise Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N01000002905

(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 nam	e, enter	the new	name	of the corporation:	
		•				

The new name must be distinguishable and contain abbreviation "Corp." or "Inc." "Company" or "Co."		
B. Enter new principal office address, if applicable		-
(Principal office address <u>MUST BE A STREET ADD</u>		
		
C. Enter new mailing address, if applicable:	(82)	
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
	•	
_	<u></u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	•	. 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 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)

<u>Title</u>	Name	Address	Type of Action
<u>D.</u>	Robert H. Juska	561 Aspen Road West Palm Beach 33405	
· .			
	·		
(attach ad PLPEASE INCORP	ing or adding additional Articles, enditional sheets, if necessary). (Be spontational sheets, if necessary). (Be spontational sheets, if necessary). (Be spontational sheets). AS HE NO LOARY OF PRAISE	ecific)	<u> </u>
	II SHALL BE CHANGED RO R		
	ARD APPROVAL AS PART OF		•
		1	
	•	7.	
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`.			

The date of each amendment(s) a	dontion: June 11th 2010
	(date of adoption is required)
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 ad 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 adopted by the board of director	bers entitled to vote on the amendment(s). The amendment(s) was/were rs.
Dated JUNE 11	1TH 2010
Signature	Meen Stu
have not	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)
	WILLIAM STROTHER
,	(Typed or printed name of person signing)
	C.E.O.
	(Title of person signing)

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