| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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04/02/09--01016--003 **43.75

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: FAL | TH "N" A | ACTION MINISTRIE | es, inc. |
|--|-----------------|--|---|
| DOCUMENT NUMBER:NO\ | 20000 | 1826 | |
| The enclosed Articles of Amendment | and fee are | submitted for filing. | |
| Please return all correspondence conc | erning this n | natter to the following: | |
| MARYIM | Name of C | OHEN JR. Contact Person) | |
| FAITH "N" A | CTION (Firm/ | Company) | |
| P.O. BOX | 3745 | ddress) | |
| TACKSONYIL For further information concerning th | (City/ State | 32236-7451 and Zip Code) case call: | |
| MARVIN R. COHEN. (Name of Contact Person) | JR | at (<u>904</u>) <u>356. 2</u> (Area Code & Daytime | |
| Enclosed is a check for the following | amount mad | c payable to the Florida Depa | artment of State: |
| \$35 Filing Fee \$43.75 Filing Fee Certificate of S | | \$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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301 | rcle |

Articles of Amendment to

| | FIL | ED |
|-------------------|---------------------|-------|
| 2009 ₁ | APR. | |
| TALLAH | TARY OF ASSEE, F | STATE |
| 2) | -4,7 | LABLE |

| | cies of incorporation | |
|--|---------------------------------------|---------------------------------------|
| | of | SECRETA A |
| FAITH "N" ACTION A | AINISTRIES INC. | SECRETARY OF State |
| (Name of Corporation as curr | ently filed with the Florida Dept. of | State) |
| 15840000101 | | |
| (Document Nur | mber of Corporation (if known) | |
| rsuant to the provisions of section 617.1006. following amendment(s) to its Articles of It | ncorporation: | or Profit Corporation adop |
| If amending name, enter the new name of | of the corporation: | |
| FAITH-N-ACTION CHRI | ISTIAN FELLOWSHIP | INC. |
| e new name must be distinguishable and c | contain the word "corporation" or ' | 'incorporated" or the |
| breviation "Corp." or " Inc." <u>"Company" o</u> | or "Co." may not be used in the nam | <u>e</u> . |
| Enter new principal office address, if app | | |
| rincipal office address <u>MUST BE A STREI</u> | ET ADDRESS) | |
| | | |
| | | |
| | | |
| Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) | | |
| (muning numbers MAT BE A FOST OFFI | | |
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| | | |
| | | enter the name of the |
| . If amending the registered agent and/or new registered agent and/or the new reg | | enter the name of the |
| new registered agent and/or the new reg | | enter the name of the |
| | | enter the name of the |
| <u>Name of New Registered Agent:</u> | istered office address: | enter the name of the |
| new registered agent and/or the new reg | | enter the name of the |
| <u>Name of New Registered Agent:</u> | istered office address: | enter the name of the , Florida |

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

| removed a | nd title, name, and address of each | Officer and/or Director being | g <u>added:</u> |
|---------------|---------------------------------------|-------------------------------|-----------------|
| Attach ada | litional sheets, if necessary) | | · |
| | | . :. | |
| <u> Fitle</u> | <u>Name</u> | <u>Address</u> | Type of Actio |
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| | ding or adding additional Articles, | | |
| (attach a | additional sheets, if necessary). (Be | e specific) | |
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| The date of each amendment(s) adoption: MARCH31, 2009 |
|--|
| Effective date if applicable: MARCH 31, 2009 (no more than 90 days after amendment file date) |
| 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. |
| Dated 3/31/2009 |
| Signature Marvin R. Cohen J. |
| (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, o other court appointed fiduciary by that fiduciary) |
| MARVIN R. COHEN, JR. (Typed or printed name of person signing) |
| DiRECTOR / PASTOR (Title of person signing) |