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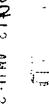


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COVER LETTER

Division of Corporations Light of Life Worship Center, Inc. NAME OF CORPORATION: N01000005808 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Clark A Lazare, D.Div. (Name of Contact Person) (Firm/ Company) 1100 NW 4 Street (Address) Fort Lauderdale, FL 33311 (City/ State and Zip Code) clark.lazare@att.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person) (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)

Mailing Address
Amendment Section
Division of Corporations

P.O. Box 6327

TO: Amendment Section

Street Address
Amendment Section
Division of Corporations
Clifton Building

(Additional Copy is Enclosed)

Articles of Amendment to Articles of Incorporation of



Light of Life Worship Center, Inc.			2019 Sep) 1	3 AMTI: 2
(Name of Corporation as curren	itly filed with	the Florida Dept. of State)		
N01000005808			· : .	, ;
(Document Numb	per of Corporat	ion (if known)		,
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Floride</i>	Not For Profit Corporatio	n adopts the follo	owing
A. If amending name, enter the new name of the corporat	ion:			
The Light Center, Inc.			Th	e new
name must he distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ttion" or "inco	rporated" or the abbreviation		
B. Enter new principal office address, if applicable:	1100 NW 4 S	treet		
Principal office address MUST BE A STREET ADDRESS) Fort Lauderd	ale, FL 33311		
				
		· - · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			 	
		· · · · · · · · · · · · · · · · · · ·		
D. If an adding the anxiety of court and to account a second				
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office and agent and/or registered office and agent	<u>ce address in</u> iddress:	riorida, enter the name of	<u>the</u>	
Name of New Registered Agent:				
The transfer of the state of th				
		(Florida street address)		
New Registered Office Address:				
		, Flor	ida	
	(City)	(Z	ip Code)	
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: miliar with an	l accept the obligations of th	ne position.	
	ignature of Ne	w Registered Agent, if chang	ging	

E. If amending or adding additional Articles, enter change(s) here:	
(attach additional sheets, if necessary). (Be specific)	
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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	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add Remove		···	
6) Change			

•	August 28, 2019	
The date of each amendment(s) adopt	lion:	_, if other than the
date this document was signed.	· · · · · · · · · · · · · · · · · · ·	_
August 2	28, 2019	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this block of document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not ment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopt 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	
8-29-2019 Dated		
	De la companya della companya della companya de la companya della	
Signature	9/2	
	or vice chairman of the board, president or other officer-if directors	
have not been se	elected, by an incorporator - if in the hands of a receiver, trustee, or	
other court appo	pinted fiduciary by that fiduciary)	
	LAKIC A. LAZMORE	
	(Typed or printed name of person signing)	
	CEO PRESIDENT	
	(Title of person signing)	

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