## N030000000879

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

CIRCI NAME OF CORPORATION:	E OF PRAYE	R PRAISE & WO	RSHIP CENT	TER INC.
N03000000	879			
DOCUMENT NUMBER:		· ·-·		
The enclosed Articles of Amendment ar	id fee are submit	ted for filing.		
Please return all correspondence concert	ning this matter t	o the following:		
Jack L. Thompson				
	()	Name of Contact Per	son)	
		(Firm/ Company)	· · · · · · · · · · · · · · · · · · ·	
2590 Dolphin Drive				
		(Address)		***
Delray Beach, Florida 33445				
	(C	City/ State and Zip C	ode)	
E-mail addre	ss: (to be used fo	or future annual repo	rt notification	
For further information concerning this	matter, please ca	11:		
Jack L. Thompson			561	706-3706
(Name of C	ontact Person)		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following an	nount made paya	ble to the Florida De	partment of S	State:
	ate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certiti Certiti	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address		Stre	et 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

## CIRCLE OF PRAYER PRAISE & WORSHIP CENTER INC.

(Name of Corporation	as currently filed with the Flori	ida Dept. of State)
N03000000879		
(Docum	nent Number of Corporation (if kn	nown)
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not For</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name		" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ble:	
(Principal office address MUST BE A STREET A	<u>DDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)  D. If amending the registered agent and/or registered agent and/or the new registered Agent:  Name of New Registered Agent:	stered office address in Florida,	enter the name of the
<u></u>	132 S.W. 4th, Ave.	
New Registered Office Address:	(Flo	orida street address)
	Delray Beach, Fl.	. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent:  at. I am familiar with and accept  Signature of New Province	the obligations of the position.

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	V Mik	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Vernita Thompson-Gates	132 S.W. 4th. Ave.
Add			Delray Beach, Fl. 33444
X Remove			
2) Change	P	Gregory L. Gates	132 S.W. 4th. Ave.
X Add			Delray Beach, Fl. 33444
Remove	T	Jack L. Thompson	2590 Dolphin Dr.
X Add			Delray Beach, Fl. 33445
Remove			
4) Change	<del></del>		
Add			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		Puna 2 of 1	

amending or adding	, if necessary).    (B	Be specific)			
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	10/15/17	
The date of each amendment(	s) adoption:	, if other than the
date this document was signed.		
	11/15/17	
Effective date if applicable:		<u> </u>
	(no more than 90 days after amendment file date)	
	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendmentoroval.	eni(s)
Dated  Signature  (By the have nother c	chairman of vice chairman of the board, president or other officer-if directly been selected, by an incorporator – if in the hands of a receiver, trustee tourt appointed fiduciary by that fiduciary)  They are the fiduciary of t	etors
	(Title of person signing)	

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