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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LIVING WATERS INTERNATIONAL MIN	JIMIES, IA
DOCUMENT NUMBER: NO4000000000000000000000000000000000000	-
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Lorraine Chin-Alejandro (Name of Contact Person)	-
	-
(Firm/ Company)	
1169 Ocean Avenue Brookyn, NY 11230 (Address)	_
Brooklyn, Ny /1230 (City/ State and Zip Code)	_
Lochin @ AOL. Com	•
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Lorraine Chin 347. 628-4072	
(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	

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

LIVING WATERS I	NTERNATIO	NAL MINISTRIES]	ΓΝί
Name of Corporation as currently filed with the Fl	orida Dept. of State)		
N/)4/	000000726		
	Number of Corporation (if	known)	
ursuant to the provisions of section 617.1006, Florida nendment(s) to its Articles of Incorporation:	Statutes, this Florida Not I	For Profit Corporation adopts the folk	owing
. If amending name, enter the new name of the co	rporation:		
			e new
ame must be distinguishable and contain the word "c Company" or "Co." may not be used in the name.	orporation" or "incorporat	ted" or the abbreviation "Corp." or "I	nc.
 Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u> 			
<u></u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	X,		
(Maning address <u>Mary Merry 1997 1977 100 1997</u>	<u> </u>		
If amending the registered agent and/or register	ad office address in Florid	in enter the name of the	
new registered agent and/or the new registered of		ia, enter the name of the	
Name of New Registered Agent:			
Name of New Negaterea Agent.	·····		
		(Florida street address)	
New Registered Office Address:	·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		. Florida	
_	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.		pt the obligations of the position.	
	Signature of New Regi	istered 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	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	Treasurer, Director	Chin-Alejandro, Lorraine	1314 SW 160 Hyenso WESTON, FL 33326
2) Change Add			
Remove 3)			
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add Remove		 	
		ticles, enter change(s) here: (Be specific)	

		
		
		
		
		<u></u> .
		; -
The date of each amendment(s) adoptic date this document was signed.	on:	, if other than the
Effective date if applicable:		
I.Metive date it appreasse.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte 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 entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 277024
Signature Lannais a Chin alejandina
(By the chairman or vice chairman of the board, president of 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)
(Typed or printed name of person signing)
Director Trajurer (Title of person signing)

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