N04000001048

(Re	equestor's Name)		
(Ad	ldress)		
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	· = #)	
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COVER LETTER

TO: Amendment Section Division of Corporations

•		
NAME OF CORPORATION:	Divine Revelation	Family Worship Center, Inc
DOCUMENT NUMBER: N0400	0001048	
The enclosed Articles of Amendment and fee are sub-	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Lionel	-	
2101101	(Name of Contact Person	n)
The Church of the Divine Rev	•	•
4670 PortoFino Way Apt 211	(Firm/ Company)	
1500 N. Congress Ave C		
	(Address)	
West Palm Beach, FL 33	340 9	
	(City/ State and Zip Cod	e)
tonyaminott@aol.	com	•
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Tonya Minott	_{at (} 561-	644-4347
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation

DIVISION OF CORFORATIONS

15 DEC 17 PM 1:52

The Church of Divine Revelation Family Worship Center, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)
N0400001048
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) About 10 Portofino Way About 12 Portofino Way Apt 211 West Palm Brach 12 Portofino Way Apt 211 West Palm Brach 12 Portofino Way Apt 211
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent:
(Florida street address) New Registered Office Address:
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
l hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
\mathcal{N}
Signature of New Registered Agent, if changing

Page 1 of 4

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	<u>V</u> <u>Mi</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	S	Shirley Chevere	4d Executive Center Drive Apt 214 West Palm Bety, FL. 33401
2) Change Add	<u> </u>	Walter Harper	3401 Ave O RIVIERA Beti, FL 33404
Remove 3) Change Add Remove	工	Gregory Holmes	1500 NI. CONEROSS AR APT B-47 West Relimber, FR. 33401
4) Change Add Remove	<u>S</u>	Stacey Fanfan	1500M. CONGROSS AVE APT C-17 West Rdm Beach, FL 38401
5) Change Add Remove			
6) Change Add Remove			

E.	If amending or adding	additional Article	s, enter change(s) here
	(attach additional sheets.	if necessary) (Re specific)

Article 4: Add: Upon the dissolution of the organization, assets shall be distrubuted for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations as said Court shall determine, which are organized and operated exclusively for such purposes.

	e date of each amendment(s) adoption: \(\frac{12\left(10\left)20\left(5)}{12\left(10\left)20\left(5)}\)	, if other than the
Eff	ective date if applicable: (no more than 90 days after amendment file date)	
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	^
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	5
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	15 DEC 17 PM 1:50
	Dated 12/19/2015	7 1.
	Signature A	ž
	(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, or other court appointed fiduciary by that fiduciary)	
	Lionel Minott	
	(Typed or printed name of person signing)	
	PD Pastor	
	(Title of person signing)	