N04000007188

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: SHILOH INTER	RNATIONAL MINISTRIE	S INC
DOCUMENT	NUMBER: <u>N0400007188</u>		
The enclosed A	rticles of Amendment and fee are subm	nitted for filing.	
Please return all	correspondence concerning this matte	r to the following:	
_	PIERRE	A LAURENT	
	(Name of C	Contact Person)	
-	(Firm/	Company)	
	2354 CHEROK	KEE COVE TRAIL	
•	(Ac	idress)	
		E, FLORIDA 32221	
	(City/ State	and Zip Code)	
_	E-mail address: (to be used	for future annual report notification	on)
For further info	mation concerning this matter, please of	call:	
PIERRE LAU	RENT	at (904) 497-3160 (Area Code & Daytime	
()	Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a ch	eck for the following amount made pay	vable to the Florida Department of	State:
\$35 Filing Fe	e	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy
Cartination (Cartination)	Mailing Address	Street Address	is enclosed)
	Amendment Section	Street Address Amendment Section	
•	Division of Corporations	Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center C	irola
	· within which is a second of the second of	Tallahassee, FL 32301	ii CiÇ

Articles of Amendment Articles of Incorporation of

SHILOH INTERNATIONAL MINISTRIES JAC . (Name of Corporation as currently filed with the Florida Dept. of State)

N040000718	38	
(Document Number of Corpo	ration (if known)	
Pursuant to the provisions of section 617.1006, Florida Statuthe following amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For</i>	Profit Corporation adopts
A. If amending name, enter the new name of the corpora	tion:	
P.A.L MINISTRIES	S, INC.	
The new name must be distinguishable and contain the we abbreviation "Corp." or "Inc." "Company" or "Co." may	ord "corporation" or "in not be used in the name.	ncorporated" or the
B. Enter new principal office address, if applicable:	2354 CHEROKE	E COVE TRL
(Principal office address <u>MUST BE A STREET ADDRESS</u>	JACKSONVILLE	, FL 32221 A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 61432 JACKSONVILLE,	30 PH 12: 39 SEE, FLORDA
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		enter the name of the
Name of New Registered Agent:	N/A	
New Registered Office Address: (Fa	orida street address)	
	N/A	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I a position.	l Agent: m familiar with and acc	cept the obligations of the

Signature of New Registered 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)

<u>Title</u>	<u>N</u> ame	<u>Address</u>	Type of Action
	N/A		☐ Add ☐ Remove
<u> </u>	N/A		□ Add
	N/A		☐ Add ☐ Remove
(attach	additional sheets, if neces.	•	<u>iere</u> : ES INC. WILL OR MAY CONDUC
A FELLO	OWSHIP SERVICE IN	ITS LOCATION.	
	· · · · · · · · · · · · · · · · · · ·		
 			
	and the state of t		
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The date of each amendmen	t(s) adoption: 03-26-2010
Effective date <u>if applicable</u> :	03-26-2010 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
[] The amendment(s) was/wee was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated 03-2	26-2010
Signature _	
hav	the chairman of vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator — if in the hands of a receiver, trustee, our er court appointed fiduciary by that fiduciary)
	PIERRE A LAURENT
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)