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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	IN LOVE ADVENT MINISTRIES
DOCUMENT NUMBER: NO40	000011555
The enclosed Articles of Amendment and tee are submitted	for filing.
Please return all correspondence concerning this matter to the	ne following:
KENRICK RICHARDS	e of Contact Person)
`	,
TRUTH IN LOVE A	EVENT MINISTRIES,
. (Firm/Company)
4795 atrus	Way
77.	(Address)
Cooper City	PL. 33830
(Vity)	State and Zip Code)
KENSAMRIC	State and Zip Code) LHC GMAIL. Com ture annual report notification)
E-mail address: (to be used for fi	iture annual report notification)
For further information concerning this matter, please call:	
KENRICK RICHARDS	at (954) 478-4673
(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:
(A)	3.75 Filing Fee & ctified Copy Iditional copy is closed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
⋜ ₩	Tallahassee, FL 32301

Tallahassee, FL 32301



February 1, 2019

KENRICK RICHARDS TRUTH IN LOVE ADVENT MINISTRIES, INC. 4795 CITRUS WAY COOPER CITY, FL 33330

SUBJECT: TRUTH IN LOVE ADVENT MINISTRIES, INC.

Ref. Number: N04000011555

We have received your document for TRUTH IN LOVE ADVENT MINISTRIES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Florida Non-Profit Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 119A00002379

Diane Cushing Senior Section Administrator

www.sunbiz.org

Articles of Amendment

Article	es of Incorporation			
TRUTH IN LOVE	ADVENT MINISTRIES INDINISTRIES INDINISTRIES INDINISTRIES INDINISTRIES			
— ··— · — · — · — · — · — · — · — · — ·				
	0 0 11555: ber of Corporation (if known)			
·	•			
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following			
A. If amending name, enter the new name of the corpora	the new			
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc."			
•	11705 Citrus Wall			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	Cooper City, FL. 33330			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4795 Citrus Way Cooper City, Fr. 33330			
If amending the registered agent and/or registered off new registered agent and/or the new registered office				
Name of New Registered Agent:	N/A			
	/			
	(Floruda street address)			
New Registered Office Address:	4//			
	, Florida			
	(City) / (Zip Code)			
New Registered Agent's Signature, if changing Registered				
I hereby accept the appointment as registered agent. I am fo	umiciar with and accept the obligations of the position.			
	/V/ /T			
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:

(Attack 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.

X.Change X.Remove X. Add	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change		/A
Remove		
2) Change	- N	/A
Remove		A
Add		,
4) Change Add	/	A
Remove	N	A
5) Change Add	 /	
Remove	٨	//1
6) Change		-//
Add		

E. If amending or adding additional Articl (attach additional sheets, if necessary).	es, enter change(s) here: (Be specific)
	N/A
	7
	· · · · · · · · · · · · · · · · · · ·

	A//A			
The date of each amendment(s) adoption: _	<u> </u>	<u> </u>		, if other than the
date this document was signed.	11. 11	α 1	2010	
Effective date if applicable:	MARCH	Ul,	2017	
(110)	more than 90 days after ame	navneni ju	e aate)	
Note: If the date inserted in this block does not document's effective date on the Department of		y filing re	equirements, this date will not	be listed as the
Adoption of Amendment(s) $(\underline{C}$	HECK ONE)			
☐ The amendment(s) was/were adopted by twas/were sufficient for approval.	the members and the number	of votes c	ast for the amendment(s)	
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The ar	nendment(s) was/were	
Dated MARC	H 01, 2019			
Signature	Dichard .			
	ce chairman of the board, pres			
	 by an incorporator – if in the fiduciary by that fiduciary 	e hands o	I a receiver, trustee, or	
odies court appointed	* *	4		
	KENRICK K (Typed or printed name	ich	ARBS	
,	(Typed or printed name	of person	signing)	
	Ora in more	1.		
/	(Title of second	16	<u> </u>	
	(Title of pers	son signin;	g)	