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T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Pentecostal Full Gospel Crusade Church of Jesus
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Elvira Surmons (Name of Contact Person) Pentecestal Full Gaspel Crusacle Church of Jesus Christ, Inc (Firm/Company)
(Name of Contact Person)
Kentecostal Full Gaspel Crusade Church of Jesus Christ, Inc
(Firm/ Company)
5105 IV. US Highway 441
Ocala, Floricla 34475 (City/ State and Zip Code)
Pfgcadmin 1 Demharamail, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (352) (22-6960) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee \& \bigcup \\$43.75 Filing Fee \& \bigcup \\$52.50 Filing Fee \\ Certificate of Status \\ (Additional copy is enclosed) \\ (Additional Copy is Enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation
Penterostal Full Gopel Crusade Church of Jesus Christ Texas (Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Pentecostal Full Cospel Worship Center, INCo The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Cala, Florida 34475
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) SAME AS ABOVE.
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:
New Registered Office Address: (Floridg street address) , Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change Add Remove		
2) Change Add Remove 3) Change Add Remove		
4) Change Add Remove		
5) Change Add Remove		
δ) Change Add Remove		

E. If amending or adding additional Artic (attach additional sheets, if necessary).	cles, enter chan (Be specific)	nge(s) here:	
		MAH	
<u></u>			
<u>-</u>			
			
			

The date of each amendment(s) adoption: 10/26/12
Effective date if applicable: 10/26/12
(no more than 90 days after dinendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
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 10/26/12 Signature Surmons
(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)
ELVIRA Surmons
ELVIRA Surmons (Typed or printed name of person signing) Church Administrator
(Title of person signing)