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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

	•
NAME OF CORPORATION: HOLY COV	nost Miracle Revival Church:
DOCUMENT NUMBER: <u>HD 50000</u>	02751
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Cassandra L. (Name of Contact	et Person)
(Firm/ Comp	nany)
(Pith) Comp	
(Address	·)
(City/ State and 2	Zip Code)
For further information concerning this matter, pleas	se call:
Cassandra L. Sones (Name of Contact Person)	at (850) 597 - 7079  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Ce	3.75 Filing Fee & S52.50 Filing Fee certified Copy dditional copy is nclosed)
Mailing Address  Amendment Section	Street Address
Division of Corporations	Amendment Section Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment
to
Articles of Incorporation
of

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: NEW CORPORATE NAME (if changing): (must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation) AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) iones/Socretary/Acceptenten-P.O.Box 430, Midway 7/32343 Deaconess-P.D. Box 432 Midway 7/32343 Her-Sunday Sch. Teacher D.D. Box 451 Midway 7.32343 reasure-P.D'box 451 Midway H. 32343

The date of adoption of the amendment(s) was: April 17, 2009
Effective date if applicable:  (no more than 90 days after amendment 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 was sufficient for approval.
There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.
Signature Amana Contract Signature S
Cassandra L. Jones (Typed or printed name of person signing)
Secretary Accounter (Title of person signing)

FILING FEE: \$35