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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO		ess Church House (Of God Saints In Chri	
DOCUMENT NUMBER:	N05000003256			
The enclosed Articles of An	nendment and fee are sub	mitted for filing.		
Please return all corresponde	ence concerning this matt	er to the following:		
	(Carlton L. Raulerson		
	Name of Contact Person			
Firm/Company 11496 Rolling River Blvd				
	Address Jacksonville, Florida. 32219			
		City/ State and Zip Code	•	
		son@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information con-	cerning this matter, pleas	e call:		
Daphne A Raulerson		904	238-3444	
Name of Co	ntact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	following amount made p	payable to the Florida Depa	riment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division Clifton 2661 E	Address ment Section in of Corporations Building xecutive Center Circle	



November 13, 2014

ALL SAINTS HOLINESS CHURCH H.O.G.S.I.C., INC. P.O. BOX 550745 JACKSONVILLE, FL. 32255

SUBJECT: ALL SAINTS HOLINESS CHURCH H.O.G.S.I.C., INC.

Ref. Number: N05000003256

We have received your document for ALL SAINTS HOLINESS CHURCH H.O.G.S.I.C., 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 current name of the entity is as referenced above. Please correct your document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please submit the form in its entirety.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 414A00024206

Articles of Amendment to Articles of Incorporation of

ALL SAINTS HOLINESS CHURCH H.O.G.S.I.C., INC. (Name of Corporation as currently filed with the Florida Dept. of State)	
N0500003256	
(Document Number of Corporation (if known):	
Pursuant to the provisions of section 617 1006, Florida Statutes, this Florida Not For Profit Corpora amendment(s) to its Articles of Incorporation:	ation adopts the following
. If amending name, enter the new name of the corporation: Lighthouse Faith Ministry House Of God Saints In Christ Inc.	The new
name must be distin guishable and contain the word "corporation" or "incorporated" or the abbrev "Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
***************************************	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	· ·
C. Enter new mailing address, if applicable:	<u>, </u>
(Mailing address MAY BE A POST OFFICE BOX)	
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	- 92°
D. If amending the registered agent and/or registered office address in Florida, enter the name	of the So
new registered agent and/or the new registered office address:	<u> </u>
Name of New Registered Agent:	
(Florida street address)	
New Registered Office Address:	
, Florida	
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent; hereby accept the appointment as registered agent. I am familiar with and accept the obligations of	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	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
<u>X</u> Add	SY	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	Daphne A. Raulerson	11496 Rolling River Bivd
Add		-	Jacksonville, Florida
Remove			32219
2) Change	TR	Lee Morris Ford	6430 Crodial Dr.
Add	-		Jacksonville, Florida
Remove			32256
3) Change	P	Cariton L. Raulerson	11496 Rolling River Blvd
Add			Jacksonville, Florida
Remove			32219
Remove			
4) Change			
Add			
Remove			
5) Change			ALCOHOL - TA MANUSCA A ALCOHOL - MANUSCA A ALC
Add			
Remove			
6) Change			
Add			
Remove			

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Page 3 of 4

	e date of each amendment(s) adoption:e this document was signed.	, if other than the					
Effe	ective date <u>if applicable</u> :	_					
	(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.						
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.						
	OCTOBER 27, 2014						
	Signature Collin L. Pulesmi						
	(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)	_					
	CARLTON L. RAULERSON						
	(Typed or printed name of person signing)						
	(Title of person signing)						