N05000007342

(Requ	uestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Docu	ument Number)	
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TO: Amendment Section Division of Corporations

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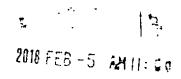
NAME OF CORPORATION:	
N05000007342 DOCUMENT NUMBER:	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for f	iling.
Please return all correspondence concerning this matter to the fol	lowing:
Sandara Williams	
(Name of	Contact Person)
Sandara Williams Ministries, Inc.	
(Firm	/ Company)
8508 VILLAGE GREEN ROAD	
(A)	Address)
Orlando, FL 32318	
(City/ Stat	e and Zip Code)
RevSandaraWilliams@gmail.com	
E-mail address: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
Sandara Williams	407 925-6071
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount-made payable to the	e Florida Department of State:
☐ \$35 Filing Fee	d Copy Certificate of Status onal copy is Certified Copy

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 of



Diva Sisternood, Inc.	Diva Sisternood, Inc.				
(Name of Corporation as curre	ently filed with the Flo	rida Dept. of State)			
N05000007342					
(Document Num	nber of Corporation (if k	nown)			
Pursuant to the provisions of section 617.1006, Florida Statt amendment(s) to its Articles of Incorporation:	utes, this Florida Not Fe	or Profit Corporation adopts the following			
A. If amending name, enter the new name of the corporation	ation:				
Sandara Williams Ministries, Inc.		The new			
name must be distinguishable and contain the word "corpor" "Company" or "Co." may not be used in the name.	ration" or "incorporate	d" or the abbreviation "Corp," or "Inc."			
D. Enter new principal office address if applicable	N/A				
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u> .	<u>s</u>)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A				
D. If amending the registered agent and/or registered of 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:		lorida street address)			
N/A		, Florida			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing Registered liberals of the appointment as registered agent. I am		t the obligations of the position.			
	Signature of New Regis	stered 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)

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 X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) Change		N/A	
Add			<u> </u>
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
N/A	
	

	December 22, 2017	
The date of each amendment	t(s) adoption:	, if other than the
date this document was signed		
	December 22, 2017	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not be be be been state is records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dece Dated	mber 22, 2017	
Signature	andara & Williams	
· •	e chairman or vice chairman of the board, president or other officer-if directors	
	not been selected, by an incorporator - if in the hands of a receiver, trustee, or	
other	court appointed fiduciary by that fiduciary)	
Sa	ndara Williams	
	(Typed or printed name of person signing)	
Pr	esident	
_	(Title of person signing)	