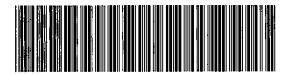
N050000743/

(Req	uestor's Name)	,
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

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17/19/10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Light of the Wo	orld Chur	ch Ministries	
DOCUMENT NUM	BER: N05000007431			
The enclosed Article.	s of Amendment and fee are sub	mitted for fil	ling.	
Please return all corr	espondence concerning this mat	er to the foll	owing:	
		icia Wynn		
	(Name of	Contact Pers	son)	
	Light of the Wo	orld Church	n Ministries	
	(Firm	/ Company)		
	P.O.	Box 7675		
	(<i>F</i>	Address)		
	Tallahas	see, FL 32	314	
	(City/ Star	te and Zip Co	ode)	
	pewyn E-mail address: (to be use	n@msn.co d for future a	om annual report notifi	cation)
For further informati	on concerning this matter, please	e call:		
Patricia Wynn		at (8	350 <u>)</u> 413-16	70
(Name	of Contact Person)	(Area Code & Dayt	ime Telephone Number)
Enclosed is a check t	or the following amount made p	ayable to the	Florida Departme	nt of State:
☑\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certified	nal copy is	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314		Street Address Amendment Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions ter Circle

Articles of Amendment to Articles of Incorporation of

FILED

2010 NOV 16 PM 4 52

Ministries SECRETARY OF STATE
the Florida Dept. of State
•
ion (if known)
, this <i>Florida Not For Profit Corporation</i> add
<u>n:</u>
Church Inc
"corporation" or "incorporated" or the the used in the name.
1609 Old Bainbridge Rd.
Tallahassee, FL 32303
P. O. Box 7675
Tallahassee, FL 32314
address in Florida, enter the name of the dress:
ida street address)
, Florida
(City) (Zip Code)
gent: familiar with and accept the obligations of
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: (Attach additional sheets, if necessary)

<u>Title</u>	' <u>Name</u>	Address	Type of Action
<u>T</u>	Strong, Kelvin	309 Ridge Rd. Tallahassee, FL 32305	☐ Add ☑ Remove
<u>T</u>	Moody, Kyra	2738 West Tharpe Street Apt. 2304 Tallahassee, FL 32303	☐ Add ☐ Remove
<u>T</u>	Nobles, Robert T.	5635 Cypress Circle Tallahassee, FL 32303	☑ Add ☐ Remove
	ng or adding additional Articles, enter of itional sheets, if necessary). (Be specificational sheets).		
	·		

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)

Title	<u>Name</u>	Address	Type of Action
T	Nobles, Angeletta M.	5635 Cypress Circle	☑ Adđ
		Tallahassee, FL 32303	Remove
			
Т	Peters, Wendy B.	2321 Oliver Street	🗹 Add
	-	Tallahassee, FL 32310	Remove
		·	
		. 4	Remove
			
E. If am	ending or adding additional Articles, e	nter change(s) here:	
(attack	andditional sheets, if necessary). (Be s	specific)	
			
· · · · · ·			
	1935 - 33		
	<u> </u>		<u> </u>
		<u> </u>	<u> </u>

The date of each amendmen	t(s) adoption: 10/3/2010
Effective date <u>if applicable</u> :	(date of adoption is required)
$U_{i} = U_{i}$	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	bre adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
hav	the chairman or vice chairman of the board, president or other officer-if directors re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	•
	Patricia E. Wynn
	(Typed or printed name of person signing)
	LOTWC Trustee Treasurer Secretary
	(Title of person signing)