Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

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: (305)444-4994

: (305)444-4977

nter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

COR AMND/RESTATE/CORRECT OR O/D RESIGN

SFH MINISTRIES, INC.

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Certificate of Status	0	
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Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to

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Artic	des of Incorpoi of	ration	رب ر
SFH MI	NISRIES, IN	IC,	
(Name of Cornoration as curre	ntly filed with t	he Florida Dept. of S	itate)
N05	000010435		
(Doorment Nun	iber of Corporati	on (if known)	
Pursuant to the provisions of section 617.1006, the full owing amendment(s) to its Articles of La		this Florida Not For	Profit Corporation adopts
A. If amending name, enter the new name of	the cornoration	<u>1:</u>	
The new name must be distinguishable and co abbreviation "Corp." or "Inc." "Company" o B. Enter new principal office address, if app	<u>r "Co." may not</u> licable:	"corporation" or "it be used in the name.	recopporated" or the
(Principal office address MUST BE A STREE	TADDRESS)	·	
:			
C. Enter new mailing address, if applicable Mailing address MAY BE A POST OFFI			
D. If amending the registered agent and/or remember registered agent and/or the new registered agent			nter the name of the
Name of New Registered Agent:	BARE	BARA ROJAS	
·	3682	W. 12 AVE.	
Nove Rugistored Office Address:		da street address)	~~
	_ H	IALEAH	Florida 33012
		(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.

Registered Agent if changing

Page 1 of 3

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>	Name	Address	Type of Action	
P/D	REINOLD CABRERAS	3882 W, 12 AVE.	_ [] Add	
		HIALEAH, FL 33012	☑ Romove	
P/D	BARBARA ROJAS	3682 W, 12 AVE.	_ 전 Vqq	
		HIALEAH, FL 33012	Romove	
<u>.</u>			_	
			,	
E. If amendin (attach add)	ig or adding additional Articles. (Honal sheets, if necessary). (Bo	enter change(s) here: 1 specific)		
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		<u> </u>		
		<u> </u>		

The date of each amendment(s)) adoption: 11/10/2010
	(slate of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for approx	adopted by the members and the number of votes cast for the amondment(s) val.
There are no members or me adopted by the board of direct	mbers entitled to vote on the smendment(s). The amendment(s) was/were stors.
Dated	10/2010 De Li
(By at the state of	echainman or vise 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 court appointed fiduciary by that fiduciary)
,	REINOLD CABRERAS
	(Typed or printed name of person signing)
	.P/D
	(Title of person signing)