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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations Born Again Indoor atobox Ministries, Inc. NO500001/030 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) 619 N. Ohio Ave. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed)

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	s of Amendment to	MITTO
Articles	of Incorporation	15 MAY -5 HALL
Born Again Indoor / Outdo	or Ministries,	15 MAY -5 MI II: 24 INCOMENANT OF STATE
A / O C O A 4 O A 14	C C	TOTAL TECHINA
(Document Number of Con	poration (if known)	wdj
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For Profit Corp</i>	poration adopts the following
A. If amending name, enter the new name of the corporation	on:	
name must be distinguishable and southin the word "compact	20.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01.00 01	The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on or incorporatea or the abb	reviation Corp. or inc.
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	<u> </u>	
		•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
•	<u> </u>	
D. If amonding the registered areas and/our registered after		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		ime of the
Name of New Registered Agent: James	Thompson Jr.	_
,	Unio HVC. Florida street address)	_
New Registered Office Address:	,	<i>H</i> /
Lakelano (City)	, Florid	la <u>FL 33805</u> (Zip Code)
No. D. Carlotte and Co. Carlotte and Carlotte and Co. Carlotte and Co. Carlotte and Co. Carlotte and Carlotte and Co. Carlotte and Co. Carlotte and Co. Carlotte and Carlotte and Co. Carlotte and Carlo		
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	sent: iliar with and accept the obligation	ons of the position
	Ihompso V. Registered Agent, if changing	
Signature of New R	egistered 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 X_Remove X_Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	_ρ	James Fox	1130 N. Ohio Aux. Lakeland, FC 33805
_X Remove	^	1	803 (odo-11/8
2) Change Add	β	James Thompson ir.	Lakeland, FL 33805
Remove 3) Change Add X Remove	_5	Enid Stokes	863 808-9620 1130 N. Ohio Auc. Lakeland, FL 33805
4) Change Add Remove	5	Annie Mae Kilgore	1107 Edith Ave Lakeland, FL 33805 863 686 - 7918
5) Change Add	1	Shirley Johnson	1107 Bhis Auc. Lakeland, FL 33805
Remove 6) Change Add Remove	エ	Vern Thompson	619 XI- Ohio AVC. Lakeland, FC 33705 863 808-9620

lf amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) added this document was signed.	Adoption: 4/17/15	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.	
There are no members or men adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
have not	Arman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
<u>Ja</u>	(Typed or printed name of person signing) President (Title of person signing)	