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Amend Name Org. April 8/14/09

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ration: SHA	Lom	INTER	NATIONAL	MINISTRI	ES, INC.
DOCUMENT NUM	BER:	0500	00116	78		<del></del>
The enclosed Articles	of Amendment and	fee are sub	mitted for	filing.		
Please return all corre	espondence concernit	ng this mat	ter to the fo	ollowing:		
<u></u>	RONALD	С	REING	olos		
		(Name of	Contact Po	erson)		
	GODS WA	RHORS	E MI	NISTRIES	,	
			/ Company			
4	3116 RAT	LIFF	RD.			
	3116 RAT	(,	Address)	· · · · · · · · · · · · · · · · · · ·		
C A	ILLAHAN	F /	320	) 1		
<u></u>	IOC /I /I//IV	(City/ Sta	te and Zip	Code)		
	DELNOL OF	200		505am a	UET.	
	REINOLOS E-mail address	(to be use	d for future	e annual report no	otification)	-
For further information	on concerning this ma	atter, pleas	e call:			
DONALD C	O FIAINI NS		,	904 . 7	59-053	) <b>3</b>
RONALD C (Name	of Contact Person)	<del></del> -	at (	(Area Code & I	Daytime Telephor	ne Number)
Enclosed is a check for	or the following amo	unt made p	ayable to t	he Florida Depar	tment of State:	
☐\$35 Filing Fee	□ \$43.75 Filing I	Fee &	<b>□ \$</b> 43	.75 Filing Fee &	<b>™</b> \$52.	50 Filing Fee
	Certificate of Stat		Certifi	ed Copy	Certific	ate of Status
			(Addit enclos	cional copy is sed)		ed Copy onal Copy losed)
	ng Address			Street Address		,
	dment Section			Amendment Sec		
	ion of Corporations Box 6327			Division of Corp Clifton Building		
	nassee, FL 32314			2661 Executive		

Tallahassee, FL 32301

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09 AUG 1 | AM 10: 06

Articles of Amendment to Articles of Incorporation of

ALLAHASSEE, FLORIDA

SHALOM	INTERNATIONAL	. MINISTRIE	ES INC.
(Name of Corpor	ation as currently filed with	the Florida Dept. of S	tate)
<b>N</b> (	05 0000 11678		
(1	Document Number of Corporat	ion (if known)	
Pursuant to the provisions of section to the following amendment(s) to it		, this <i>Florida Not For</i>	Profit Corporation adopt
A. If amending name, enter th	e new name of the corporatio	<u>n:</u>	
GODS WA	RHORSE MINIS	TRIES . INC	c .
GODS WAL The new name must be distinguabbreviation "Corp." or "Inc."			corporated" or the
B. Enter new principal office a Principal office address <u>MUST</u>		43116 RA	TLIFF RD.
			32011
C. Enter new mailing address (Mailing address MAY BE A		P.O. BD)	
		CALLAHAN	) FL
			32011
D. If amending the registered new registered agent and/o	agent and/or registered office r the new registered office add		nter the name of the
Name of New Registered	Agent: RONALD	C REINDL	<u>0</u> 5
New Registered Office Ac		RATLIFF (da street address)	ਨ0
	CALLA	<u>リ み ル</u> (City)	, Florida 320 // (Zip Code)
New Registered Agent's Signat hereby accept the appointmen			ept the obligations of th

Page 1 of 3

Signature of New Registered Agent, if changing

position.

### 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
DI <u>r/Pre</u> s	MILAGROS MENDOZA	3A BLOCK 5 UNIT 1 SHERWOOD OAK DR OLANGE PARK FL 32	Remove
DIR/VP	JOSE L. MENDOZA	SHERWOOD GAN DR	Remove
se <u>c/the</u> ns	JOE L. MENDOZA	3A BLOCK 5 UNIT 1 SHERWOOD OAK DR CRANGE PAPE PL 32	Remove
	ng or adding additional Articles, enter of itional sheets, if necessary). (Be specified)		
	, , , , , , , , , , , , , , , , , , , ,		

If amending the Officers and/or Directors, enter the title and name of each officer/di ector 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
ADVISOR.	HECTOR ORTIZ	TACKSONVILLE FL	D' OR D' Add  Remove
AO <u>VI SOR</u>	JOYCE OWENS	COLUMBUS G	A PRemove
ADVISOR	JAMIE WILLIAMS	801 22"0 A PHENIX CITY 368	VE ☐ Add AL ☐ Remove
	ling or adding additional Articles, entereditional sheets, if necessary). (Be special		
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		,	

## 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
pres	RONALD C. REINDLDS	CALLAHAN FL 32011	Add Remove
,	DANA L. REINDUS	CAUAHAN FL 32011	☐ Remove
<u> 172015</u>	RONALD R. REINDLOS	BRYSON CIEK Tail BRYSON CITY NC 28713	- ☑ Add □ Remove
	g or adding additional Articles, enter c tional sheets, if necessary). (Be specifi		
			,
· · · · · · · · · · · · · · · · · · ·			<del></del>

# If amending the Officers and/or Directors, enter the title and name of each officer/di ector 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
ADVISOR	MILAGROS MENDOZA	457 SHERWOOD O OPANGE PARK 320	FL 🗆 Remove
ADVISOR	JOSE L. MENDOZA	320	Remove 73
ADVISOR	SDANN REINDUDS	25 Pigeow Creek BRYSON CITY 287	NC Remove
	ding or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
			<del></del>
**************************************			

The date of each amendment(s) a	doption: 7-28-09 (date of adoption is required)
	(date 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 adwas/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.
have not	chairman 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 art appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)  (Title of person signing)

Page 3 of 3