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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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JUN 1 8 2013



Patricia A. Laseter
(Name of Contact Person)
New Zion Apostolic Prophetic International Ministries Inc.
2101 Vista Parkway Suite 297
West Palm Beach, FL 33411 (City/ State and Zip Code)
Paranewzion ministries inc. org E-mail address: (to be used for huture annual report notification)
For further information concerning this matter, please call:
Patricia A. Laseter # 561-635-9650
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee  Certificate of Status  Certified Copy  (Additional copy is enclosed)  Certificate of Status  Certified Copy  (Additional Copy is Enclosed)  Certificate of Status  Certified Copy  (Additional Copy is 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



May 23, 2018

PATRICIA A LASETER 2101 VISTA PKWY STE 297 W PALM BEACH, FL 33411

SUBJECT: NEW ZION APOSTOLIC PROPHETIC INTERNATIONAL

MINISTRIES, INC.

Ref. Number: N06000002313

We have received your document for NEW ZION APOSTOLIC PROPHETIC INTERNATIONAL MINISTRIES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 418A00010807

## Articles of Amendment to Articles of Incorporation of

New Zion A postolic Prophet	ic International Ministries Inc.
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	<u>ion:</u>
	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co," may not be used in the name.  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	2101 Vista Parkway Suite 297 West Palm Beach, FL 33411
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
<del></del>	(City) , Florida
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am last	Agent:
Si	ignature of New Registered Agent, if changing
ŧ	Page 1 of 4 SSET

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 Doc  V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change		
Add		
Rепюче		
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

E. If amending or ac (attach additional)	dding additional Art sheets, if necessary).	(Be specific)	ige(s) here:			
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The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirements, this date will no partment of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK DNE)	
was/were sufficient for approve	bers entitled to vote on the amendment(s). The amendment(s) was/were	
have not be	man or vice chairman of the board, president or other officer-if directors sen selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)  Petricia A. Laseter  (Typed or printed name of person signing)	
	President/CEO (Title of person signing)	