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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Many Mans	sions Ministries			
DOCUMENT NUMBER: N0600000249	6			
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning the	nis matter to the following:			
Dexter	D. Sanders			
(Name of	Contact Person)			
Many M	Mansions Ministries			
(Firm	/ Company)			
3411 Lake Breeze Drive				
(/	Address)			
	o Florida 32808			
(City/ Stat	e and Zip Code)			
For further information concerning this matter	r, please call:			
Dexter D. Sanders	at (407) 758-5599			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:	· .			
✓ \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee 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			

Articles of Amendment to Articles of Incorporation of

Many Mansions Ministries 2nc.			
(Name of corporation as currently filed with the Florida Dept. of State)			
N06000002496			
(Document number of corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida No Corporation</i> adopts the following amendment(s) to its Articles of Incorporation		rofit	
NEW CORPORATE NAME (if changing):			
(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or we language; "Company" or "Co." may not be used in the name of a not for profit corporation)		e impo	rt in
<u>AMENDMENTS ADOPTED</u> - (OTHER THAN NAME CHANGE) Indicate Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECI			
Officer/Director Detail should include: Camille Sanders should be added as the Vice President of Many	/ Mansions	s Ministr	ies Inc
Camille A. Sanders- Title VP			
2256 Laurel Blossom Circle US			
Orlando, Florida 34761	Ate		
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(Attach additional pages if necessary) (continued)

The date of adoption of the amendment(s) was: August 1, 2007
Effective date if applicable: August 1, 2007
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was (were) adopted by the members and the number of votes cas for the amendment was sufficient for approval.
There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.
Signature Signature (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or
other court appointed fiduciary, by that fiduciary.)
Dexter D. Sanders
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35