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## **COVER LETTER**

Amendment Section Division of Corporations

Gospel For Africa, li IE OF CORPORATION:	nc.
N06000003389	
inclosed Articles of Amendment and fee are submi	tted for filing.
e return all correspondence concerning this matter	to the following:
stopher A. Jones	
(1	Name of Contact Person)
pel For Africa, Inc.	
	(Firm/ Company)
Kings Post Rd.	
	(Address)
ockledge, FL 32955	
(0	City/ State and Zip Code)
elle@gospelforafrica.com	
E-mail address: (to be used f	or future annual report notification)
urther information concerning this matter, please c	all:
pelle Jones	561 612-9944 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
osed is a check for the following amount made pay	able to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	\$43,75 Filing Fee & S52,50 Filing Fee Certified Copy (Additional copy is enclosed)  \$\sigma \text{\$13,75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

pel For Africa, Inc.					
e of Corporation as currently filed with the	e Florida De	ept. of State)			
.000003389					
(Docum	nent Numbe	r of Corporation	on (if known)		
iant to the provisions of section 617,1006. Floidment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida</i>	Not For Profit Corp	oration adopts the	e following
amending name, enter the new name of the	e corporatio	<u>on:</u>			
	_				The new
must be distinguishable and contain the word npany" or "Co." may not be used in the name		on" or "incor	porated" or the abbi	reviation "Corp."	or "Inc."
Inter new principal office address, if applica		n/a			
. ,	,	<del></del> -			
			<u> </u>		_
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	<u>BOX</u> )	n/a			
				<u>: - : : : : : : : : : : : : : : : : : :</u>	24
	-				- <b>K</b> O
				<u> </u>	
f amending the registered agent and/or regi			lorida, enter the na	ame of the frield	
iew registered agent and/or the new register					
Name of New Registered Agent:	Noelle Je	ones		<u> </u>	<del></del>
	918 Kings	Post Rd		3500	38
Nam Banistana LOMas Addresses			(Florida street add	ress)	
<u>New Registered Office Address:</u>	Rockledge			3295	i5
		(City)	<del></del> -	Florida (Lip Code)	
		•		()	
Registered Agent's Signature, if changing leby accept the appointment as registered agent			accept the obligation	ons of the position.	
,		Noe	lle m	ost parameter	
-	Sig	nature of New	Registere Agent	changing	

ddress of each ( h additional sheel note the officer, resident; V = Vic tive Officer; CF( President, Treast	Officer and/or Diets, if necessary)  Addirector title by the President; T= To and and area. The Chief Finance arer, Director wo	irector being added: he first letter of the office title: Freasurer; S= Secretary; D= Dir ial Officer. If an officer/director uld be PTD.	rector: TR= Trustee; C = Chairman or Clerk; CEO = Chief cholds more than one title, list the first letter of each office
nge, Mike Jones .	leaves the corpor		is listed as the PST and Mike Jones is listed as the V. There is and S. These should be noted as John Doe, PT as a Change,
ple: vange emove dd	V Mik	n Doc te Jones y Smith	
of Action ck One)	Title	Name	Address
Change Add _X. Remove	_P	Jones, Christopher A	918 Kings Post Rd Rockledge, FL 32955
Change _X_ Add Remove	_P_	Jones, Noelle B	918 Kings Post Rd Rockledge, FL 32955
Change Add X. Remove	_v_	McCarthy, Robert J	2690 Forrest Run Dr Melbourne, FL 32935
Change Add _X Remove	_s_	Crawford, Gerald	234 Pine Hov Circle #C2 Greenacres, FL 33463
Change	_D_	Rojas, Gustaco David	9324 Holliston Creek Place

Badia, Job Robert

Badia, Patricia

Add
X Remove
Change

X\_ Add

\_X\_ Add

\_Remove \_Change

Remove

\_ST\_\_

tach additional sheets, if necessary). (Be specific)

amending or adding additional Articles, enter change(s) here:

Winter Garden, FL 34787

BP 235 Gagnoa

BP 235 Gagnoa

Gagnoa, Cote d'Ivôire

Gagnoa, Cote d'Ivôire

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	n/a				
late of each amendment(s) adopti his document was signed.	on:				, if other than the
tive date <u>if applicable</u> :					
	(no more thai	n 90 days after an	nendment file date	)	
If the date inserted in this block denent's effective date on the Departs	oes not meet the nent of State's	e applicable statu records.	tory filing requires	ments, this date will n	ot be listed as the
ition of Amendment(s)	(CHECK O	NE)			

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated	10/29/2024
Signature	Noelle Tonel
_	(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)  Noelle B. Jones
	(Typed or printed name of person signing)
	President
	(Title of person signing)

here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.