| (Requ | estor's Name) | <u>-</u> |
|---|-----------------|-------------|
| (Addre | ess) | |
| (Addre | ess) | |
| (City/S | state/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busin | ess Entity Nam | e) |
| (Document Number) | | |
| Certified Copies | Certificates | of Status |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | |

Office Use Only



500080760725

10/13/06--01020--028 **35.00

FILED

06 OCT 13 PH 2: 01

SECRETARY OF STATE

PS 10/13/00

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: Greater Blessings Ministry, Inc. | | |
|--|--|--|
| DOCUMENT NUMBER: NO 6000004616 | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| Alfred W. Clark (Name of Contact Person) | | |
| | | |
| (Firm/ Company) | | |
| 2214 Demeron Rd. (Address) | | |
| Tallahassee F1 32308 (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| Same at (850) 224 6/6/ (Name of Contact Person) (Area Code & Daytime Telephone Number) | | |
| Enclosed is a check for the following amount: | | |
| \$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed) | | |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building | | |

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

OG OCT 13 PM 2:01

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

Creater Blessings Ministry, Inc.

(Name of corporation as currently filed with the Florida Dept. of S

NO 600000 46/6
(Document number of corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

| NEW CORPORATE NAME (if changing): | | | | |
|---|--|--|--|--|
| (must contain the word "corporation," "incorporated," or the abbreviation "corporation," or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation) AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | |
| | | | | |
| | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | |
| • | | | | |
| | | | | |
| | | | | |

(Attach additional pages if necessary)
(continued)

| The date of adoption of the amendment(s) was: | | |
|---|--|--|
| | | |
| | was (were) adopted by the members and the number of votes cast was sufficient for approval. | |
| There are no membe amendment(s) was (| ers or members entitled to vote on the amendment. The were) adopted by the board of directors. | |
| Signature A | or vice chairman of the board, president or other officer- if directors | |
| have not been sel | ected, by an incorporator if in the hands of a receiver, trustee, or need fiduciary, by that fiduciary.) | |
| - Ocho | ped or printed name of person signing) | |
| Vire | Sifer (Title of person signing) | |

FILING FEE: \$35