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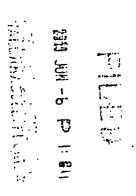
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	ELISTS FOR JESUS TA	BERNACLE, INC.	
DOCUMENT NUMBER:	0		
The enclosed Articles of Amendment and f			
Please return all correspondence concerning	g this matter to the follow	wing:	
GEORGE SANDS			
	(Name of Co	ntact Person)	
EVANGELISTS FOR JESUS TABERNAG	CLE, INC.		
	(Firm/C	ompany)	
15108 MARTIN LUTHER KING, JR. BLV	/D.		
	(Add	ress)	
DOVER, FLORIDA 33527			
	(City/ State ar	nd Zip Code)	
georgesands61@gmail.com	•		
E-mail address: (to be used for future ann	nual report notification	n)
For further information concerning this matt	er, please call:		•
GEORGE SANDS		813	759-3308
(Name of Conta	ect Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoun	t made payable to the Fl	orida Department of	State:
\$35 Filing Fee \$\sum \\$43.75 Filing Certificate c	ng Fee & S43.75 Filing of Status Certified Confederation (Additional enclosed)	opy Certif copy is Certif	0 Filing Fee ficate of Status fed Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Sect Division of Corpo Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EVANGELISTS FOR JESUS TABERNACLE, INC.

ETTHOSSISTSTORTESOS TABBANACLE, I	INC.					
(Name of Corporatio	n as curren	tly filed with the Florida	Dept. of State)			
N06000008340						
(Docu	ment Numb	er of Corporation (if knov	vn)		-	_
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statute	es, this <i>Florida Not For P</i>	rosit Corporation	adopts th	e follow	ing
A. If amending name, enter the new name of th	ne corporati	on:				
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam	d "corporal	ion" or "incorporated" c	or the abbreviation	"Corp.	The no	?W . "
B. Enter new principal office address, if applicable:		15108 MARTIN LUTHER KING, JR. BLVD.				
		DOVER, FLORIDA 33527			_	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4459 LOTT AVENU	E			_
		PLANT CITY, FLO	RIDA 33567			<u> </u>
•				-		
If amending the registered agent and/or registered agent and/or the new registered.	stered offic	e address in Florida, ent	er the name of th	<u>ie</u>		
Name of New Registered Agent:	Name of New Registered Agent: GEORGE SANDS					
	4459 LOT	T AVENUE				_
New Registered Office Address:		(Florida	street address)			_
,	PLANT C		, Florid	33567		
lew Registered A control Ci-		(City)	(Zip	Code)		
ew Registered Agent's Signature, if changing be hereby accept the appointment as registered agen	Registered A at. I am fam	Agent: illiar with and accept the	obligations of the	position.		
~7_	He	ngl W. I	and	<u>.</u>		
	Sig	influre of New Registered	l Agent, if changir	18	70	
	P	age 1 of 4			 GB	

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 A Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	DP	MARGUERITE L. PEEK	14604 FRANKLIN AVENUE
Add		·	DOVER, FLORIDA 33527
Remove			
2) Change	DP	GEORGE SANDS	4459 LOTT AVENUE
X Add			PLANT CITY, FLORIDA 33567
Remove	DVP	LINDA SANDS	AASO LOTT AVENUE
3) Change X		ENDA GANOG	4459 LOTT AVENUE
Add Remove			PLANT CITY, FLORIDA 33567
4) Change	<u>s</u>	PATRICIA PLUMMER	3913 HENRY ROWELL ROAD
X Add			PLANT CITY, FLORIDA 33567
Remove			
5) Change	DT	ROBERT PLUMMER	3913 HENRY ROWELL ROAD
X Add			PLANT CITY, FLORIDA 33567
Remove			
6) Change		•	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
7) ADD - DESTINY SANDS, AS ASSISTANT SECRETARY/ADDRESS: 4459 LOTT AVE., PLANT CITY, FL 33567				
8) REMOVE - MARGUERITE L. PEEK - AS REGISTERED AGENT AND HER ADDRESS (SEE D. ON PAGE 1)				

The date of each amendment(s) ado date this document was signed.	ption:	, if other than th
Effective date if applicable:		
Effective date it applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this da	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendm	ent(s)
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/ws.	rere
Dated Ma	4302019	
. Signature <u>He</u>	nge W. Sunds	
have not been	an or vice chairman of the board, president or other officer-if direct selected, by an incorporator – if in the hands of a receiver, trustee pointed fiduciary by that fiduciary)	tors , or
GEORGE	SANDS	
	(Typed or printed name of person signing)	_
PRESIDEN	VT.	
-	(Title of person signing)	