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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

`TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LION OF JU	JDAH WORSHIP CE	ENTER INTERNATIONAL, INC.
DOCUMENT NUMBER: N0600001287	3	
The enclosed Articles of Amendment and fee	are submitted for filing	5.
Please return all correspondence concerning t	his matter to the follow	ring:
ROSEMARY RIVAS		
(Name of	Contact Person)	
DOCUMENT EXPRESS		
(Firm	n/ Company)	
6289 W SUNRISE BLVD. #12		
(,	Address)	
SUNRISE, FL 33313		
(City/ Sta For further information concerning this matte	te and Zip Code) r, please call:	
ROSEMARY RIVAS	at (_954)	581-9660
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed is a check for the following amount	:	
	\$43.75 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

FILED
2007 AUG -6 AN -
SECRETARY OF STATE TALLAHASSEE, FLORIDA

LION OF JUDAH WORSHIP CENTER INTERNATIONAL INC.

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

N06000012873
(Document number of corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may <u>not</u> 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)
ARTICLE V- REMOVE ANTONIO CARROL AS TREASURER AND REPLACE WITH
DORIS JENKINS AS TREASURER / VICE PRESIDENT- HER ADDRESS IS
1001 FULLWOOD AVENUE, CRESCENT CITY, FLORIDA 32112
(Attach additional pages if necessary)

(Attach additional pages if necessary) (continued)

FAX NO. :

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.)

Aug. 01 2007 01:10PM P1/1

DR. WILLIAM LEE (Typed or printed name of person signing)

There are no members or members entitled to vote on the amendment. The

amendment(s) was (were) adopted by the board of directors,

PRESIDENT (Title of person signing)

FILING FEE: \$35