M0700000163

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: God's Glory From Heaven Evangelism Withressing Mibrary Inc.
DOCUMENT NUMBER: <u>N0700000163</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Palin I Town Co
Robin L. Jones Sc. (Name of Contact Person)
God's Glory From Heaven Evangelism Wittnesday Ministry Incorportation (Firm/Company)
3030 Hickory Gin Drive (Address)
Orange Park, FL 32065 (City/State and Zip Code)
gghminutry dyahob. Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
/ case can.
(Name of Comact Person) at (904) 962-3372 (Area Code & Daytime Telephone Number)
(Name of Comact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

God's Glory From Heaven Evangelism (Name of Corporation as currently filed with the Flor	ida Dept. of State)
N0700000163	
(Document Number of Corpora	tion (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes mendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>on:</u>
God's Glory From Heaven Outr	each Ministry Inc. The new on" or "incorporated" or the abbreviation "Corp." or "Inc."
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	4
	In the state of th
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u> </u>
D. If amending the registered agent and/or registered office	anddress in Florida, anter the name of the
new registered agent and/or the new registered office ad	
Name of New Registered Agent:	
	
	Florida street address)
New Registered Office Address:	
· .	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	

Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were a was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s)		
There are no members or mem adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were tors.		
Dated <u>3/18</u>			
Signature	Loe Se.		
have not be	rman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)		
	Robin L. Jones Sr.		
•	(Typed or printed name of person signing)		
	Tresident		
	(Title of person signing)		

. ____