

N 07000004386

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2011 OCT 19 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Lion of judah prophetic outreach center international inc

DOCUMENT NUMBER: N07000004286

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dr. Apostle William D Lee
(Name of Contact Person)

Lion of Judah
(Firm/ Company)

1709 Anastasia Way
(Address)

St Petersburg Florida 33712
(City/ State and Zip Code)

drlee712@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. Apostle William Lee at (919) 904-0679
(Name of Contact 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

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$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

Lion of judah prophetic outreach center international inc,

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

N07000004286

(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:

A. If amending name, enter the new name of the corporation:

NEW BIRTH PROPHETIC INC,

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

*(Principal office address **MUST BE A STREET ADDRESS**)*

114 Challenge Rd

Raleigh Nc 27603

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

114 Challenge Rd

Raleigh Nc 27603

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

1709 Anastasia Way

(Florida street address)

St Petersburg

(City)

Florida 33712

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
sd	Yvette Butler	512 70th Place north Pinellas Park Florida 33781	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
T	Shavon Cook	848 Bay point drive Madeira Beach Florida 33708	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Sd	Antonio Carroll	1709 Anastasia Way St Petersburg Florida 33712	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Dr, Alice Hayes 1709 Anastasia Way St Petersburg Florida 33712 (New Treasure) She is
Replacing. Shavon cook (T)

Evangelist Anita Wilson 1709 Anastasia Way St Petersburg Florida 33712 (New Director)
Replacing Yvette Butler (Sd)

Yolanda Fuller 1709 Anastasia Way St Petersburg Florida 33712 (New Administrator) (A)

The date of each amendment(s) adoption: 10/17/2011

(date of adoption is required)

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 10/17/2011

Signature Dr. Apostle William Lee
(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)

Dr. Apostle William Lee
(Typed or printed name of person signing)

Apostle Pastor President
(Title of person signing)