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Amend.

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### COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: LORENZO & ANDREA SPENCER MINISTRIS INC. DOCUMENT NUMBER: NOT QQQQQ 6978 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ME. LDEENZO SPENCER (Name of Contact Person) ORENZO DANGREA SPENCER MINISTRIES (Firm/Company) (City/ State and Zip Code) Spence (Uninzer Ymail address: (to be used for future annual report notification) For further information concerning this matter, please call: MR. LOOTNIO SPENCER at (210) 570-7621

(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: □\$43.75 Filing Fee & □\$43.75 Filing Fee & **☐**\$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

(Name of Corporation as current	ly filed with the Fl	orida Dept. of S	State)
NOTOPOROS LORENZ (Document Number	<u>い るかんでん</u> r of Corporation (if	Spence.1 known)	MINISTRIES INC
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not I</i>	or Profit Corpo	eration adopts the following
A. If amending name, enter the new name of the corporation	on:		
			The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporat	ed" or the abbro	eviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )			2019 J
			LAH - 8
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )			PH 3: 45
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		a, enter the nan	ne of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)		33.)
			, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered 2 Thereby accept the appointment as registered agent. I am fam		ot the obligation	s of the position.
	mature of New Revi	stered Joent if	chanoina

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:

 $P = President; V \in Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.$ 

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the F. 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 X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change		<u> </u>	
Add			
Remove			
KCHOX			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
INSIDE OUT TRAINING TEAM STEAM STANGE IN FAYERLUITE, NC
Clemberland County 15 Augusta 2015 by MS SANAGO HASKINS
1910 HARRIS & St. FAYELLEVILLE, NO 28301 Conduct Various
training employment framing stratual life skills training
it include careus exectorment skills training Resume Weiling,
Job placement, Seminars williship and spiritual Retriats
,

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	1 .
Effective date if applicable: 1 JAN 2019	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dedocument's effective date on the Department of State's records.	ite will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment/was/were sufficient for approval.	ient(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wadopted by the board of directors.	vere
Dated 27 Dec 2018	
Signature Loveny Spanier	
(By the chairman or vice chairman of the board, president or other officer-if dire have not been selected, by an incorporator – if in the hands of a receiver, trustee other court appointed fiduciary by that fiduciary)	
LORENZU SPENCER	
(Typed or printed name of person signing)	
VP	
(Title of person signing)	