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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GODS LAND, INC.
DOCUMENT NUMBER: NO 70 00 012 30 3
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
(Name of Contact Person)
GETTH/ Company)
y (Firm/ Company)
1740 N.E. 145th St. (Address)
(Address)
Notat MiAmi BEACH, Fr 3318/ (City/ State and Zip Code)
(City/ State and Zip Code)
E-mail address: (ty be used 101 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
E-mail address: (to be used for turn
For further information concerning this matter, please call:
(Name of Contact Person) at 78 b 37b - 4758 (Area Code) (Daytime Telephone Number)
(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 \$\bigcup \text{\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)} \$\bigcup \text{\$43.75 Filing Fee & Certificate of Status (Certified Copy (Additional Copy is Enclosed)} \$\bigcup \text{\$52.50 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate of Status (Additional Copy is Enclosed)} \$\bigcup \text{\$135 Filing Fee & Certificate (Additional Copy is Enclosed)} \$\begin{subable} \$135 Filing Fee &

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



GODSUM	NO INC	16 MAR 18 PM 4: 01
(Name of Corporation as curren	tly filed with the Florida Dep	t. of State)
NOT	000017303	
	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit</i>	Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:	
GODSLANI	D FOUNDATIO	N. Inc. The new
GDDSLANI name must be distinguishable and contain the word "corpora	tion" 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:	N/A	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office	ce address in Florida, enter th	e name of the
new registered agent and/or the new registered office a	ddress:	
Name of New Registered Agent:	NA	
	/ 	
New Registered Office Address:	(Florida stree	et address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		gations of the position.
	NA.	
Si	ignature of New Registered Age	ent, if changing

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 X_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>	1	Address
1) Change Add Remove		- N)	A	
2) Change Add			delde e dille in en alle e di me naluraname e bar-	
Remove 3) Change				
Add				
4) Change				
Add				
5) Change Add			····	
Remove		A		
6) Change Add		.		
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
N/A	
	
	
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The date of each amendment(s) adoption: date this document was signed.	MARCH	1st 2011	, if other than the
Effective date <u>if applicable</u> :	more than 90 days af	der amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of		statutory filing requirements, this date	e will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)		
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the r	number of votes cast for the amendme	nt(s)
There are no members or members entitle adopted by the board of directors.	ed to vote on the amen	dment(s). The amendment(s) was/we	re
Dated 3 14	16		
	d, by an incorporator -	ard, president or other officer-if direct - if in the hands of a receiver, trustee, ciary)	or B
		d name of person signing)	H THE COLUMN
	DREW	DENT	

(Title of person signing)