## 1008000000015

(R	equestor's Name)	
•		
(A	ddress)	
•		
(Δ	ddress)	
,	aa.000)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL.
; (B	usiness Entity Na	me)
(D	ocument Number	)
Certified Copies	Certificate	s of Status
	<del></del>	<del> </del>
· · · · · · · · · · · · · · · · · · ·		
Special Instructions to	Filing Officer:	

Office Use Only



200168315292

02/11/10--01038--013 \*\*35.00

02/11/10--01038--015 \*\*8.75

02/11/10--01038--014 \*\*8.75

SECRETARY OF STATE

APROVED



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Althon Marscene Ministries, INC.		
DOCUMENT NUMBER: NO800000751		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Althea M. Williams		
(Name of Contact Person)		
(Firm/ Company)		
757 SE 17th St., #304		
(Address)		
Fort Lauderdale, Florida 33316 (City/State and Zip Code)		
The vod ministries international Ogmail. com		
E-mail address: (to be used for future annual report not fication)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (305) 303 8769 (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 Certificate of Status Certified Copy (Additional copy is enclosed)  □\$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)  □\$52.50 Filing Fee & Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section  Street Address Amendment Section		
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building		
Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301		



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 12, 2010

ALTHEA M WILLIAMS 757 SE 17 ST #304 FT LAUDERDALE, FL 33316

SUBJECT: ALTHEA MARSCENE MINISTRIES INC.

Ref. Number: N08000000751

We have received your document for ALTHEA MARSCENE MINISTRIES INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Letter Number: 310A00003669

Tracy L Lemieux Regulatory Specialist II

Division of Compositions P.O. ROY 6327 Tallahasson Florida 32314

	APpa		
Articles of Amend	a Carlotta Etc.		
to Articles of Incorpo	oration 10 FFA		
of			
Althea Marscene Minis	tres Inc MARY OF 5:3;		
(Name of Corporation as currently filed with	the Florida Dept. of State		
N0800000751			
(Document Number of Corporat	ion (if known)		
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	s, this Florida Not For Projit Corporation adopts		
A. If amending name, enter the new name of the corporation	<u>n:</u>		
The Voice of Deliverance Minis	atries International Inc		
The new name must be distinguishable and contain the word	"corporation" or "incorporated" or the		
abbreviation "Corp." or "Inc." "Company" or "Co." may no	<u> </u>		
B. Enter new principal office address, if applicable:	99 NW 1831 St. # 203		
(Principal office address MUST BE A STREET ADDRESS)	Morth Misouri		
	Florida 37169		
C. Enter new mailing address, if applicable:	Harris 110-1		
(Mailing address MAY BE A POST OFFICE BOX)	757 SE 17 5+, #304		
	Ft. Laude: dale		
	Florida 38316		
	1101100 30310		
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:			
	M. Williams		
	•4		
757 5	E 17 5+. #3 14 rida street address)		
	•		
Flori			
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered	Gent:		
I hereby accept the appointment as registered agent, 1 am position.	familiar with and accept the obligations of the		
Millian Mancere Williams.			
Signature of New	Registered Agent, if changing		

The date of each amendment(s	) adoption: 1/22/2010
Effective date <u>if applicable</u> :	(date of adoption is required) 1   22   2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes east for the amendment(s) val.
There are no members or me adopted by the board of direct	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated	0105/55/1
Signature	Mblea Warrena Williams
(By the have	he chairman or vice chairman of the board, president or other officer if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Althea Marscene Williams
(Typed or printed name of person signing)	
	President
	(Title of person signing)

Page 3 of 3