

NO8000002414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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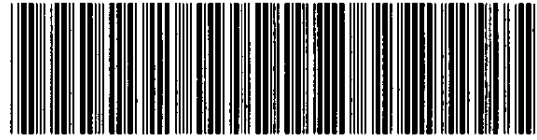
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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9/23/07*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 28, 2008

GERALD J. SAPP  
3158 GOLDEN ROCK DRIVE  
ORLANDO, FL 32818

SUBJECT: KINGDOM LIFE MINISTRIES OF ORLANDO, INC.  
Ref. Number: N08000002414

We have received your document for KINGDOM LIFE MINISTRIES OF ORLANDO, 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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) 245-6916.

Carol Mustain  
Regulatory Specialist II

Letter Number: 008A00047924

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** KINGDOM OF LIFE MINISTRIES OF ORLANDO, INC.

**DOCUMENT NUMBER:** N08000002414

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

Please return all correspondence concerning this matter to the following:

GERALD J. SAPP

(Name of Contact Person)

KINGDOM LIFE MINISTRIES OF ORLANDO, INC.

(Firm/ Company)

3158 GOLDEN ROCK DRIVE

(Address)

ORLANDO, FLORIDA 32818

(City/ State and Zip Code)

For further information concerning this matter, please call:

GERALD J. SAPP

(Name of Contact Person)

at ( 407 ) 797-4124

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$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




The date of adoption of the amendment(s) was: AUGUST 18, 2008

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 was sufficient for approval.
- There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature   
(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.)

GERALD J. SAPP  
(Typed or printed name of person signing)

INCORPORATOR AND REGISTERED AGENT  
(Title of person signing)

**FILING FEE: \$35**