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R. WHITE

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	oundant Life United Pentec	ostal Church, Inc.			
	0003021				
DOCUMENT NUMBER:					
The enclosed Articles of Amendme	ent and fee are submitted fo	r filing.			
Please return all correspondence co	ncerning this matter to the	following:			
Daniel Davy					
	(Name o	of Contact Person)	1		
Abundant Life United Pentecostal	Church, Inc.				
	(Fir	m/ Company)	**************************************		
6912 Williams Road					
		(Address)			
Seffner, FL 33584					
	(City/ St	ate and Zip Code)	)		
ddavy@yournlt.com					
E-mail a	ddress: (to be used for futur	re annual report no	otification	)	
For further information concerning	this matter, please call:				
Daniel Davy		813 at		740-1868	
(Name	of Contact Person)		a Code)	(Daytime Telephone	Number)
Enclosed is a check for the following	g amount made payable to	the Florida Depar	tment of S	tate:	
_		ed Copy ional copy is	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Sect		Street A Amendm	ddress ent Section	on	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Abundant Life United Pentecostal Church, Inc.	17 Maria -			
(Name of Corporation as curren	tly filed with the Florida Dept. of State)			
N08000003021	% 5. 344 ·			
(Document Numb	er of Corporation (if known)			
amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following			
A. If amending name, enter the new name of the corporati	ion:			
	The new			
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."			
D. Fatou now puincinal office address if applicables	6912 Williams Road			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Seffner, FL 33584			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6912 Williams Road Seffner, FL 33584			
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	ddress:			
Name of New Registered Agent: Daniel Da	avy			
6912 Will	liams Road			
<u>New Registered Office Address:</u>	(Florida street address)			
Seffner	, Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept the obligations of the position. ignature of New Registered Agent, 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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Earl Brown	10421 Opus Drive
Add			Riverview, FL 33579
X Remove			
2) Change	-		
<b>A</b> dd			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional A (attach additional sheets, if necessary,	). (Be specific	)				
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May 9, 2017	
	, if other than the
date this document was signed.	
May 9, 2017	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	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(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 5/16/17	
Signature Signature	
(By the chairman or vice chairman of the board, president of 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)	
Dogiel M. Davu	
(Typed or printed name of person signing)	
President	
(Title of person signing)	