

N08000004753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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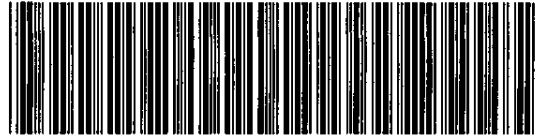
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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1/15/09

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** FAITH TEMPLE: FATHER SON & HOLY GHOST TEMPLE CO

**DOCUMENT NUMBER:** N08000004753.

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

Please return all correspondence concerning this matter to the following:

MICHAEL BURRELL.

(Name of Contact Person)

CHURCH

(Firm/ Company)

415 COLUMBIA COURT

(Address)

KISSIMMEE FL 34759.

(City/ State and Zip Code)

For further information concerning this matter, please call:

MICHAEL BURRELL

(Name of Contact Person)

at ( 321 ) 284-3632

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$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

Articles of Amendment  
to  
Articles of Incorporation  
of

Faith Temple: Father Son + Holy Ghost Temple  
(Name of Corporation as currently filed with the Florida Dept. of State)

N08000004753

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

FAITH TEMPLE TRINITY CORP.

*The new name must be distinguishable and contain the word "corporation" 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:**

*(Principal office address MUST BE A STREET ADDRESS)*

415 COLUMBIA COURT

KISSIMMEE FL 34759

**C. Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

415 COLUMBIA COURT

KISSIMMEE FL 34759.

**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:**

*Name of New Registered Agent:*

MICHAEL BURRELL

*New Registered Office Address:*

511 ELBRIDGE PLACE

*(Florida street address)*

KISSIMMEE

*(City)*

Florida 34758.

*(Zip Code)*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*



*Signature of New Registered Agent, if changing*

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Secret <input checked="" type="checkbox"/>	<u>TAMEEKA BEMBRIDGE</u>	<u>DONT KNOW.</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Secret <input checked="" type="checkbox"/>	<u>VALDA STEVENSON</u>	<u>1347 Nelson park court</u> <u>Kissimmee FL 34759</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Treas. <input checked="" type="checkbox"/>	<u>ANNICK RICHARDSON</u>	<u>805 Franconville court</u> <u>Kissimmee FL 34759</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption: January 4, 2009

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(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 January 5, 2009

Signature Michael Burrell

(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)

MICHAEL BURRELL.  
(Typed or printed name of person signing)

PASTOR/PRESIDENT  
(Title of person signing)