MOSOCICIO 6549

(Requesto	ors Name)	
(Address)		
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(City/State	e/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Business	Entity Name)	
(Docume	nt Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Winner's Kest Family Worship Center 108 00000 6549 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jodi-Ann Murray
(Name of Gontact Person) (City/ State and Zip Code) (a) winnerstest. Lon mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

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

□ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status

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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

	Articles of Amendment	
	to Articles of Incorporation	
Winner's Rest Fam (Name of Corporation as currently filed with the F	of Worship Horida Dept. of State)	Center
No8 0000 654 (Documen	G t Number of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not For I</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated" o	The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	<u></u>	
(Principal office address MUST BE A STREET ADE	DRESS)	2023
	•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BQ	<u></u>	. `
		1: 16
D. If amending the registered agent and/or register new registered agent and/or the new registered		ter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florus	la street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the	obligations of the position.
	Signature of New Registere	d 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 John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Mary Hunter	2922 Jag Road 22-24, Greenaures H 3346
X_ Remove			·
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
51 Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	ig additional Art	icles, enter change(s) here: (Be specific)	

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9/9/20	
The date of each amendment(s) adoption:	, if other than the
The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: 987070	
(no more than 90 days after amendment file	date)
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cowas/were sufficient for approval.	st for the amendment(s)

There are no mer adopted by the be	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.
Dated	09 08 2020
Signatur	(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 Hunter (Typed or printed name of person signing)
	President Servia Pastar (Title of person signing)
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