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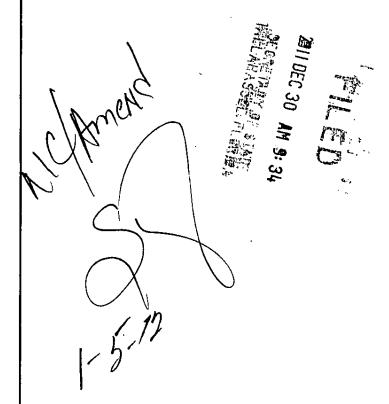
(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	<u> </u>
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	•
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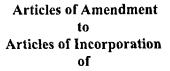


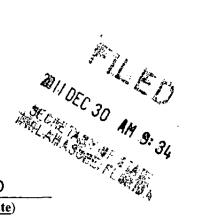
COVER LETTER

TO! Amendment Section
Division of Corporations

NAME OF CORPO	RATION: ONE NATION	UNDER GOD USA IN	ICORPORATED
DOCUMENT NUM	BER: N08000009666		
The enclosed Articles	s of Amendment and fee are sub	mitted for filing.	
Please return all corre	espondence concerning this matt	er to the following:	
	ROBERT	C. BROWN III	
	(Name of	Contact Person)	
	ONE NATION UNDER	GOD USA INCORPORA	TED
	(Firm	/ Company)	
	PO B	OX 111960	<u> </u>
	(/	Address)	
	NAPLE	S, FL 34108	
	(City/ Sta	te and Zip Code)	
		er_god_usa@msn.com d for future annual report notif	ication)
For further informati	on concerning this matter, please	e call:	
ROBERT C. BRO	OWN III	at (239) 35313	03
(Name	e of Contact Person)	(Area Code & Day	time Telephone Number)
Enclosed is a check t	for the following amount made p	ayable to the Florida Departme	ent 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)
	ing Address	Street Address Amendment Section	•
Amendment Section Division of Corporations		Amendment Section Division of Corpora	
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle		nter Circle	

Tallahassee, FL 32301





ONE NATION UNDER GOD USA INCORPORATED

(Name of Corporation as currently filed with the Florida Dept. of State)

N08000009666

(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:

ONE NATION UND	DER GOD U.S.A. MINISTRIES INC	;
	d contain the word "corporation" or "i v" or "Co." may not be used in the name.	
Enter new principal office address, if rincipal office address MUST BE A STR		
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
If amending the registered agent and/ new registered agent and/or the new 1	or registered office address in Florida, or registered office address:	enter the name of the
		enter the name of the
new registered agent and/or the new i		enter the name of the
<u>Name of New Registered Agent:</u>	registered office address:	enter the name of the

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>	Address	Type of Action
<u>VP</u>	ALAN NANCE	6263 BURR OAKS LANE NAPLES, FL 34119	□ Add ☑ Remove
<u>VP</u>	PETER K. SAVAGE	PO BOX 3638 NAPLES, FL 34106-3638	
E. If amen (attach a	ding or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)	
·		·	

The date of each amendment(s) adoption: JULY 20, 2011		
	(date of adoption is required)	
Effective date <u>if appli</u>	(no more than 90 days after amendment file date)	
Adoption of Amendm	ent(s) (CHECK ONE)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no membadopted by the boar	pers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
	ature (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)	
	ROBERT C. BROWN III (Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	
	(, me or bereau arbumb)	