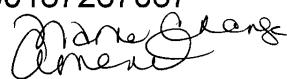
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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Healthy Growing Churches, Inc.			
DOCUMENT NUM	BER: N08000010536		
	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Mik	e Brookins	<u>-</u>
	(Name of	Contact Person)	
	Healthy Grov	wing Churches, Inc.	
	(Firm	n/ Company)	,
	5826 Hoffne	er, Ave. Suite 1001	
	······································	Address)	
		te and Zip Code)	
	(City/ Sta	ne and Zip Code)	
		@flcog.org	· · · · · · · · · · · · · · · · · · ·
	E-mail address: (to be use	ed for future annual report notifica	ition)
For further information	on concerning this matter, pleas	e call:	
Mike Brookins		at (407) 737-763	3
(Name	of Contact Person)		ne Telephone Number)
Enclosed is a check for	or the following amount made p	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		Street Address Amendment Section Division of Corporatio Clifton Building	ns

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Healthy Growing Churches, Inc. (Name of Corporation as currently filed with the Florida Dept. of ALMAN HASSEE. FLORINO8000010536 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation ad the following amendment(s) to its Articles of Incorporation: Healthy Growing Leaders, Inc. 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Florida street address) Florida (City) (Zip Code)		01	2010 DEC -2 PM 4# 33
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New Registered Office Address: (Florida street address) , Florida			
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	Non Designation LOGG - Alle		
	<u>New Registerea Office Adaress:</u>	(Florida street address)	ı
(City) (Zip Code)			
		(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of	w Registered Agent's Signature, if changi	ing Registered Agent:	I accent the obligations of t
osition,		g	The singulors of the
Signature of New Registered Agent, if changing		Signature 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)

<u>Title</u>	<u>(Name</u> .	<u>Address</u>	Type of Action
			_
			☐ Add
E. If ame	nding or adding additional Article additional sheets, if necessary). (es, enter change(s) here: Be specific)	
			F
	·		

The date of each amendment(s) ac	loption: November 17, 2010
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
g ^r · · · · · · · · · · ·	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated November	er 17, 2010
(Bythec)	partinan or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
	Dr. Gregory A. Wiens
	(Typed or printed name of person signing)
	President
	(Title of person signing)