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| , (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Amend Name To Spolif

COVER LETTER

TO: Amendment Section

| Division of Corporations |
|--|
| NAME OF CORPORATION: Abiding Faith Church |
| DOCUMENT NUMBER: NO 9000001243 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Apostle Zelford Irions (Name of Contact Person) |
| Abiding Faith Church, Inc |
| P.O. Box 3635 |
| Riverview, F. 1 33568 (City/State and Zip Code) |
| nouvership center o amail com. E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Zelford Trions at (813) 843-3676 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| S35 Filing Fee Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status (Additional copy is Enclosed) \$52.50 Filing Fee & Certificate of Status (Certified Copy (Additional Copy is Enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation (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: 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

(City)

Signature of New Registered Agent, if changing

(Florida street address)

Florida

(Zip Code)

Page 1 of 4

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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 | <u>PT</u> <u>V</u> <u>SV</u> | John Doe Mike Jones Sally Smith | |
|----------------------------------|------------------------------------|---------------------------------------|---------|
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1)Change | | | |
| Add | | | |
| 2) Change | \neq | | |
| Add Remove | ` | | |
| 3) Change | | | |
| Add Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add Remove | | | |
| •• | | | |
| 6) Change Add | | | |
| Remove | | Page 2 of 4 | |

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Page 3 of 4

| The date of each amendment(s) adoption: April 25, 2014 date this document was signed. | , if other than the |
|---|---------------------|
| Effective date if applicable: April 25, 2014 (no more than 90 days affer 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 4251294 | |
| Signature | |
| 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) | |
| (Typed or printed name of person signing) | |
| (Typed or printed name of person signing) | |
| (Title of person signing) | |