N09 000002885

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600433428436

07/23/24--01005--022 **43.75

200 (3) (100.1)



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Master Pe	ace International Ministry, Inc
DOCUMENT NUMBER: <u>NO 9000</u>	02885
The enclosed Articles of Amendment and fee are submit	cd for filing.
Please return all correspondence concerning this matter to	o the following:
τ	1 1/ 1/ -
<u> </u>	seph Valbrun ame of Contact Person)
(N	ame of Contact Person)
Master Peace Intern	(Firm/ Company)
	(Firm/ Company)
1410	Arthur Street
	(Address)
Holly wa	ad/FL/33020
(C	ity/ State and Zip Code)
Dr valme 1	984 @ gmail. (sm
E-mail address: (to be used to	r future annual report notification)
For further information concerning this matter, please cal	l:
Joseph Valbrun (Name of Contact Person)	at 954 226 - 6647 (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payal	ple to the Florida Department of State:
•	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassec, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florid	la Dept. of State)	
(Document Nui	mber of Corporation (if kn	
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not Fo</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated	The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1410 Arth	ar Street
(Principal office address <u>MUST BE A STREET ADDRES</u>	Hollywood	FL 33020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 94	<u>83</u>
	Ft. Laudera	183 191e, FL 33310
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flo	rida street address)
	<u> </u>	, Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		he obligations of the position.
	Signature of New Registe	red 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		Doc Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	Irene Belgrave	2630 W Bravard Blud. Et Landerdale, Ft 313id
X_ Remove			
2) ChangeX Add	<u>T</u>	Joseph Valbra Ja	1410 Arthur Street Hollywood, Fr 33020
Remove Change Add Remove	<u>SD</u>	Marlene Oubsil	2701 W. Onkland Ark Blud Daking Park, FL 33311
4) Change Add	<u>5D</u>	Joseph Valdrun Jr.	1710 Arthur Street Hally wand, FC 3302.0
Remove			
5) Change Add	 _		
Remove			
6) Change Add			
Remove			
E. If amending or add		rticles, enter change(s) here: . (Be specific)	

		
-		
	· · · · · · · · · · · · · · · · · · ·	
		
		
		
The date of each amendment(s) adoption	n:	if other than the
date this document was signed.	···	_, ii ouici uian iic
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not bent of State's records.	e listed as the
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)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

Dated 7/16/24 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) 70seph Valbrun (Typed or printed name of person signing)	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were
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) To seph Valbrun (Typed or printed name of person signing)	adopted by the board of directors.
(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) Toseph Valbrun (Typed or printed name of person signing)	Dated 7/16/24
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) To seph Valbrun (Typed or printed name of person signing) PS Registered Agent	·
Toseph Valbrun (Typed or printed name of person signing) PS Registered Agent	(By the chairman or vice chairman of the board, president or other officer-if directors
Toseph Valbrun (Typed or printed name of person signing) PS/Registered Agent	
(Typed or printed name of person signing) PS Registered Agent	other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing) PS Registered Agent	
(Typed or printed name of person signing) PS Registered Agent	Joseph Valbrun
PS/Registered Agent	(Typed or printed name of person signing)
(Title of person signing)	PS/Registered Agent (Title of person signing)

Statement of Facts

On this date, 7/15/2024, we prohibit Irene Belgrave from making any changes or having any power in this organization, Master Peace International Ministry, Inc. We, Joseph Valbrun and Joseph Valbrun Jr., hereby attest to her revocation from the company. This person, Irene Belgrave, has no authority to change, amend or edit anything in this corporation. Thank you.

Joseph Valbrun

Joseph Valbrun Jr.

7/16/24

7/16/24

Statement of Facts

On this date, 7/15/2024, we prohibit Marlene Dubois from making any changes or having any power in this organization, Master Peace International Ministry, Inc. We, Joseph Valbrun and Joseph Valbrun Jr., hereby attest to her revocation from the company. This person, Marlene Dubois, has no authority to change, amend or edit anything in this corporation. Thank you.

losenh Valbrun

- fart

7/16/24

Joseph Valbrun Jr. X_

7/16/24

FL Acknowledgement Notary Certificate

Document Name: Articles of Amendment
STATE OF FLORIDA COUNTY OF (County where notarization occurred)
On July 16 2024 (date), before me, Smalae her (Notary name), a notary public, personally appeared by physical presence, Joseph Valbura (Notary name), a notary public, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the attached Hindes of Amendment (name of document) instrument and acknowledged to me that that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or entity upon behalf of which the person(s) acted executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State listed above that the foregoing paragraph is true and correct. WITNESS my hand and official seal.
Personally knownOR Produced identificationOR Type of identification produced: <u>FC Diverticen</u> SCS.
Shadaeden
(Signature of notary public)
My commission expires: Feb 28, 2027 SHADAE KERR Notary Public. State of Florida Commission# HH 364358 My comm. expires Feb. 28, 2027

Official Seal