N09000003562

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COVER LETTER

TO: Amendment Section Division of Corporations

God's	Kingdom Station	n House of Prayer, Inc		
N0900000)3562			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment	and fee are submi	tted for filing.		
Please return all correspondence conce	erning this matter	to the following:		
Delores L. Williams				
	1)	Name of Contact Perso	on)	
Kingdom Word Network Ministries, I	nc			
		(Firm/ Company)		
1440 N. Lawnwood Circle Apt 16C				
		(Address)		
Fort Pierce, FI 34950				
	((City/ State and Zip Cod	de)	
deloreswilliams1954@gmail.com				
E-mail add	ress: (to be used for	or future annual report	notification)
For further information concerning thi	s matter, please ca	all:		
Delores L. Williams		77 at	72-263-3831	
(Name of	Contact Person)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following	amount made pay	able to the Florida Dep	partment of S	State:
-	5 Filing Fee & Eicate of Status	3S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address		Stree	t Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 of

God's Kingdom Station House of Prayer, Inc

FILED

God's Kingdom Station House of Frayer, Inc			Dr. Car	$\cdot i^- i$
Name of Corporation as currently filed with the	Florida I	Dept. of State)	2023 40.	
N09000003562			2023 NOV 27	PH 5:
(Docum	ent Numb	er of Corporation (if known)	141	· · · · · · ·
cursuant to the provisions of section 617.1006, Flor mendment(s) to its Articles of Incorporation:	rida Statuto	es, this Florida Not For Profit Co	orporation adopts the	following
. If amending name, enter the new name of the	corporat	<u>ion:</u>		
Kingdom Word Network Ministries, Inc				The new
ame must be distinguishable and contain the word Company" or "Co." may not be used in the name		tion" or "incorporated" or the a	bbreviation "Corp."	
B. Enter new principal office address, if applicable		1440 N Lawnwood Circle		
Principal office address MUST BE A STREET A.		Apt 16C		
		Fort Pierce, Fl 34950		_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	8 <i>0X</i>)	1440 N Lawnwood Circle		
		Apt 16C		
		Fort Pierce, Fl 34950		_
D. If amending the registered agent and/or registered new registered agent and/or the new registered			name of the	
Name of New Registered Agent:	Delores L	. Williams		
	1440 N L	awnwood Circle, Apt 16C		
New Paristand Office Address		(Florida street a	ddress)	
<u>New Registered Office Address</u>	Fort Pierc	r	34950	
		(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing R		Agent:		
hereby accept the appointment as registered agent	t. I am fai	niliar with and accept the obligat	ions of the position.	
	11/2//	\mathcal{L}	// `	

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)

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>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>Dr</u>	Delores L. Williams	1440 N. Lawnwood Circle Apt 16C Fort Pierce, Fl 34950
Remove			
2) Change Add		Dianne Culver	2010 Ave F. Fort Pierce, Fl 34950
X Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	
Currently the name of this	s organiza	ntion is God's Kingdom Station House of Prayer. The r	new name of this organization is now
Kingdom Word Network	Ministrie	s, Inc. The Officer Delores Williams is currently listed	as Pastor. The new title of
Delores Williams will nov	w be Dr.]	Delores L. Williams. The register agent is currently Di	anne Culver. Dianne Culver is
completely being remove	d. The <u>ne</u>	w registered agent will be Dr. Delores L. Williams. Di	anne Culver will no longer be listed
as the Treasurer for this o	roanizatio	on and will be completely removed from the Articles o	f Incorporation

		
		
		
		
		
		·
<u> </u>		
	Date Character and a law CNL at 20, 2022	
The date of each amendmen date this document was signed		_, if other than the
Effective date if applicable:	Effective as of November 20, 2023	
<u></u>	(no more than 90 days after amendment file date)	·
Note: If the date inserted in t document's effective date on	his block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	

adopted by the bo	ard of directors.
Dated	11/20/2023
	D.D. 2 1100
Signature	Degree / Nillians
	(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) Dr Delores L. Williams
	(Typed or printed name of person signing)
	President/Owner
	(Title of person signing)

E There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were