

NO9000004983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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01/04/10--01056--005 **35.00

FILED
10 FEB 15 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
C.COULLIETTE

FEB 15 2010

EXAMINER

COVER LETTER

**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: Truth By Fire Ministries
DOCUMENT NUMBER: NO9000004983

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Debra Reed
(Name of Contact Person)
Truth By Fire Ministries
(Firm/ Company)
5816 Harrington Drive
(Address)
Orlando, FL 32808
(City/ State and Zip Code)
Jpreachers2@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Reed at 321, 278-3362
(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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 7, 2010

DEBRA REED
TRUTH BY FIRE MINISTRIES, INC.
5816 HARRINGTON DR
ORLANDO, FL 32808

SUBJECT: TRUTH BY FIRE MINISTRIES, INC.
Ref. Number: N09000004983

We have received your document for TRUTH BY FIRE MINISTRIES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If you are changing the corporate name, you must put a corporate suffix on the name, if not remove the wording from the "A" area of the form. You will also need to put the title of the officer you are adding. The titles acceptable are Pres, VP, Sec., Treas. or assistant to any of those. The word "officer" is not considered a title and is unacceptable.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 910A00000527

Thank you - I made the corrections

RECEIVED
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
JAN 14 2010 8:00 AM

Articles of Amendment
to
Articles of Incorporation

Truth By Fire Ministries, Inc.

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

NO9000004983

(Document Number of Corporation (if known))

FILED
10 FEB 15 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

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)

750 South Orange Blossom Trail
Orlando, FL 32805
Ste #202

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

5816 Harrington Drive
Orlando, FL 32808

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:

Debra Reed - President

New Registered Office Address:

5816 Harrington Drive

(Florida street address)

Orlando

(City)

Florida

(Zip Code)

32808

New Registered Agent's Signature, if changing Registered Agent:

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

Debra Reed, President
Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President	Clay Anthony Reed	5816 Harrington Dr. Orlando, FL 32808	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
President	Debra D Reed	5816 Harrington Dr Orlando, FL 32808	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

(attach additional sheets, if necessary). (Be specific)

NONE N/A

The date of each amendment(s) adoption: 12/28/09

Effective date if applicable: 1/1/2009 (date of adoption is required)
(no more than 90 days after 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 12/28/09

Signature

Debra Reed Clay Reed
(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)

Debra Reed Clay Reed

(Typed or printed name of person signing)

Ex-President

(Title of person signing)