N09000005746

(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ELEVATION 1	MINISTRIES, INC.	
DOCUMENT NUM	BER: N09000005746		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		E PIGOTT	
	(Name of	Contact Person)	
	ELEVATION	MINISTRIES, INC.	
	(Firm	n/ Company)	<u> </u>
	COO. F	Namilas (Daise	
		Danley Drive Address)	
	(Address)	
	FORT MY	/ERS, FL 33907	
	(City/ Sta	te and Zip Code)	
		levation-ministries.org	ation)
	`	•	ation)
For further information	on concerning this matter, pleas	e call:	
JANE PIGOTT		at (239) 275-35	38
	of Contact Person)		me Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departmen	t 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)
	ng Address adment Section	Street Address Amendment Section	
	ion of Corporations	Division of Corporation	ons
	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Cente	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ELEVATION MINISTRIES, INC.

	., ., ., ., ., ., ., ., ., ., ., ., ., .	
(Name of Corporation as currently	y filed with the Florida Dept. of	State)
N09000	0005746	٠
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Flor the following amendment(s) to its Articles of Incorp		r Profit Corporation dopts
A. If amending name, enter the new name of the	corporation:	Y GF SI SEE; FE
The new name must be distinguishable and conta	in the word "corporation" or "i	incorporated or the
abbreviation "Corp." or "Inc." "Company" or "C		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		12
(Trincipul Office unuress MOST BE A STREET A	<i>DDRESS</i>)	
		1 1 2 2 2
	444	
C. Enter new mailing address, if applicable:		ACS TARY OF S
(Mailing address MAY BE A POST OFFICE	BOX)	
		STI STI
D. If amending the registered agent and/or registered agent and/or the new registered		enter the name of the
new registered agent and/or the new register	eu office aduless.	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	(
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing For I hereby accept the appointment as registered age position.		ecept the obligations of the
Signo	ature 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>	Address	Type of Action
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter clional sheets, if necessary). (Be specific		
Upon the dis	solution of the organization, asset	s shall be distributed for one	or more
exempt purp	oses within the meaning of section	501 (c) (3) of the Internal F	tevenue Code,
or correspon	ding section of any future federal t	ax code, or shall be distribut	ted to the
federal gove	rnment, or to a state or local gover	nment, for a public purpose.	Any such
assets not di	sposed of shall be disposed of by	the Court of Competent Juri	sdiction of the
county in wh	ich the principal office of the organ	ization is then located, exclu	usively for such
purposes or	to such organization or organizatio	ns, as said Court shall dete	rmine, which
are organize	d and operated exclusively for suc	h purposes.	

The date of each amendment(s) adoption: August 1, 2010
Effective date <u>if applicable</u> :	(date of adoption is required) August 1, 2010
<u> </u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or m adopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
have	the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)