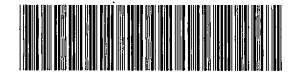
## N090000685

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	2 #\
(Oity.	/State/Zip/Filosie	<del>= 11</del> )
PICK-UP	MAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



900253038369

10/23/13--01001--013 \*\*35.00

RECEIVED

13 OCT 22 PN 3: 15

JAMESTON OF COMPRESSION

13 0CT 22 PH 3: 59

OCT 22 2013 T. CARTER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: RADICAL R	RESTORATIO	N MINISTRIES, INC
DOCUMENT NUMBER: N0000681	5	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
<b>HOLLIE BARGERSTOC</b>	K	
	(Name of Contact Person	n)
RADICAL RESTORATION	N MINISTE	RIES, INC
	(Firm/ Company)	
310 PINEY RD		
	(Address)	
TALLAHASSEE, FL 3236	05	
	(City/ State and Zip Cod	e)
E-mail address: (to be used	•	notification)
For further information concerning this matter, please	call:	
ADA HERNANDEZ	<sub>at (</sub> 407	, 304-7693
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	yable to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address  Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Bassee, FL 32301

## **Articles of Amendment Articles of Incorporation**



13 OCT 22 PN 3:59

## RADICAL RESTORATION MINISTRIES, INC

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

SECTION OF STREET

N	J	በ	n	በ	U	O	6	R	1	5
1	•		.,	v	u	u	LJ.	u	- 1	_

(Document Number of Corporation (if known)

A. If amending name, enter the new name N/A	me of the corpora	<u>.</u>	The ne
name must be distinguishable and contain "Company" or "Co." may not be used in		ation" or "incorporated" or the abbreviation "Corp	
B. Enter new principal office address, i	· <del>-</del>	310 PINEY RD	
(Principal office address <u>MUST BE A ST</u>		TALLAHASSEE, FL 32305	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		310 PINEY RD	
		TALLAHASSEE, FL 32305	
		fice address in Florida, enter the name of the	
new registered agent and/or the new		address: ARGERSTOCK	
Name of New Registered Agent:		RD TALLAHASSEE, FL 32305	
N. D. : ( 10/0 411	(Florida street address)		
<u>New Registered Office Address:</u>		RD TALLAHASSEE, Florida 32305	
	(Cit		ode)
New Registered Agent's Signature, if cl			
I hereby accept the appointment as regist	efeet agent. I am	familiar with and accept the obligations of the positi	on.

Page 1 of 4

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: XChange X Remove X Add	PT         John De           V         Mike Jo           SV         Sally Sr	ones .	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) Change	VP	OZELL KNIGHTON	1414 COASTAL HIGHWAY
Add			TALLAHASSEE, FL 32346
X Remove			
2) Change	PD	HOLLIE BARGERSTOCK	310 PINEY RD
X Add	í		TALLAHASSEE, FL 32305
Remove	Inte S		
3)Change	MA	ERIS WILSON	2864 FITZPATRICK
X Add			TALLAHASSEE, FL 32305
Remove			
4)Change	I	PA. PATRICK MCARTHER	3531 SPRING CREEK HIGHWAY
X Add			CRAWFORDVILLE, FLORIDA 32327
Remove	<b>1</b> 0	·	
5) Change		DAWN KNIGHTON	1414 COASTAL HIGHWAY
Add			PANACEA, FL 32346
Remove			
6) Change			
Add			
Remove			

If amending or adding additional sheets, if no	ecessary). (Be s	pecific)			
			<u></u>		<u></u>
	······································				<u> </u>
					·
	·			<del></del>	
<del>-</del>					· · · · · · · · · · · · · · · · · ·
				, ,	
	· · · · · · · · · · · · · · · · · · ·		· 	· · · · · · · · · · · · · · · · · · ·	
- •		<del></del>		· · ·	
		<del> </del>			
	<u> </u>	<u> </u>			
		- <u></u>			
		- <u></u>			
	<del></del>	<del></del>	<del>,,</del> -		
				·	<del> </del>

The date of each amendment(s)	adoption: OCTOBER 1, 2013	, if other than the
date this document was signed.  Effective date if applicable:	OCTOBER 1, 2013	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer was/were sufficient for appr	e adopted by the members and the number of votes cast for the amendment(s) roval.	
☐ There are no members or m adopted by the board of dir	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.	
Dated	5/1/13	
Signature	allie Carceptel	
	hairman or vice chairman of the board, president or other officer-if directors the been selected, by an incorporator – if in the hands of a receiver, trustee, or	
	urt appointed fiduciary by that fiduciary)	
HOLLIE	BARGERSTOCK	
	(Typed or printed name of person signing)	
<u></u>	irector./President	
	(Title of person signing)	