N 0 9000008 189

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|-------------------------|-------------------|-------------|
| (Re | equestor's Name) | |
| (Ac | ddress) | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL. |
| (Bu | usiness Entity Na | me) ′ |
| · (Do | ocument Number |) |
| Certified Copies | Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECRETARY OF SIATE
NAMES SEE, FLORID

C.COULLIETTE

SEP 10 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Fearfully and | Wonderfully Made Minis | stries, Inc. |
|--|--|---|---|
| DOCUMENT NUM | BER: N0900008189 | | |
| The enclosed Article | s of Amendment and fee are sub | omitted for filing. | |
| Please return all corr | espondence concerning this mat | ter to the following: | |
| | | sa McDonald | |
| | (Name of | Contact Person) | |
| | Fearfully and Wonde | erfully Made Ministries, Inc. | |
| | (Firm | n/ Company) | |
| | 3152 Hu | ttersfield Circle | · . |
| - 1. | (/ | Address) | |
| | - · · | EL 00000 | |
| | | te and Zip Code) | |
| | (City/ Sta | te and Zip Code) | |
| | E-mail address: (to be use | d for future annual report notific | ration) |
| For further informati | on concerning this matter, pleas | e call: | |
| Wanda Jones | | at (850) 423-109 | 99 |
| (Name | e of Contact Person) | (Area Code & Dayti | me Telephone Number) |
| Enclosed is a check | for the following amount made p | payable to the Florida Departmen | nt 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 |
| | P 411 | Course Addison | is enclosed) |
| Mailing Address Amendment Section Division of Corporations | | Street Address Amendment Section | |
| | | Division of Corporati | ons |
| | Box 6327 hassee, FL 32314 | Clifton Building 2661 Executive Cent Tallahassee, FL 3230 | |



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 4, 2009

VANESSA MCDONALD FEARFULLY AND WONDERFULLY MADE MINISTRIE 3152 HUTTERSFIELD CIR TALLAHASSEE, FL 32303

SUBJECT: FEARFULLY AND WONDERFULLY MADE MINISTRIES, INC.

Ref. Number: N09000008189

We have received your document for FEARFULLY AND WONDERFULLY MADE 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):

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: 509A00029618

RECEIVED

199 SEP 10 AM 8: 53

UNISHING CAN PREMISE

UNISHING CAN PREMISE

TACLIAN SEE TORIDA

Articles of Amendment to Articles of Incorporation of

Fearfully and Wonderfully Made Ministries, Inc.

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

N09000008189

(Document Number of Corporation (if known)

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:

| ne new name must be distinguishable and abreviation "Corp." or "Inc." <u>"Company</u> | | | corporated" or the |
|--|---|---------------------------------|----------------------|
| 3. Enter new principal office address, if appl | ipplicable: | 3152 Huttersfield | Circle |
| rincipal office address <u>MUST BE A STR</u> | <u>EET ADDRESS</u>) | Tallahassee, FL 3 | 32303 |
| Enter new mailing address, if applica (Mailing address MAY BE A POST OF | | PO Box 180503 | |
| | IICL DOM | | |
| | PICE BOX | Tallahassee, FL 3 | 2318 |
| If amending the registered agent and/onew registered agent and/or the new r | or registered office | address in Florida, e | |
| . If amending the registered agent and/o | or registered office | address in Florida, e | |
| If amending the registered agent and/onew registered agent and/or the new r | or registered office egistered office ad | address in Florida, e | |
| . If amending the registered agent and/onew registered agent and/or the new registered of New Registered Agent: | or registered office egistered office ad | address in Florida, e dress: | |
| If amending the registered agent and/onew registered agent and/or the new remains and the new registered agent and the new remains agent and the new registered agent. | or registered office egistered office ad | address in Florida, e dress: | nter the name of the |

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> | <u>Address</u> | Type of Action |
|------------------|---------------------------|--|-----------------------------|
| | | | Add Remove |
| | <u></u> | | |
| | | | ☐ Add☐ Remove |
| (attach a | idditional sheets, if nec | onal Articles, enter change(s) here: essary). (Be specific) s entered incorrectly on original Arti | icles. Should be changed to |
| 918 V ita | Lane Ft. Walton Be | each, FL 32547 | |
| Vaness | ia UcDonald | Should be re-entered of | as: |
| Vax | nessa McC | onald-Harris | |
| | | | |
| | | | |
| | | ······································ | |
| | | | |
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| | | | |

| The date of each amendment(s) a | Idoption: August 26, 2009 |
|--|--|
| | (date of adoption is required) |
| Effective date <u>if applicable</u> : | |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were ac was/were sufficient for approva | iopted by the members and the number of votes cast for the amendment(s) 1. |
| There are no members or mem adopted by the board of director | bers entitled to vote on the amendment(s). The amendment(s) was/were ors. |
| have no | chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, of our appointed fiduciary by that fiduciary) |
| | Vanessa McDonald |
| | (Typed or printed name of person signing) |
| | President |
| _ | (Title of person signing) |