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OIVISION OF CORPORATIONS
12 OCT 15 PH 12: 33

0CT 16 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: JOB Chris	stian Fellow	rship, Inc.
DOCUMENT NUMBER: N1000004	258	
The enclosed Articles of Amendment and fee are subr	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Roderick Stephan Love,	Sr.	
	(Name of Contact Person	1)
New Dimensional Minist	ries	
	(Firm/ Company)	
5026 Plymouth Street St	uite 4	
	(Address)	
Jacksonville, Florida 322	205	
	(City/ State and Zip Cod	e)
pastorrslove@gm	ail.com	
E-mail address: (to be used		notification)
For further information concerning this matter, please	call:	
Roderick Stephan Love	, Sr. _{at} 904	772-5165
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations	Amend	Address Iment Section on of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of



12 OCT 15 PM 12: 33

JOB	Christian	Fellowship,	Inc.
		i onottoinp,	1110.

(Name of Corporation as currently filed with the Florida Dept. of State) N10000004258

(Document	t Number of Corpora	ation (if known)	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporation		s, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new na	me of the corporati	on:	
New Dimensional Ministri	ies, Incorpor	ated The ne	
name must be distinguishable and contain "Company" or "Co." may not be used in		ion" or "incorporated" or the abbreviation "Corp." or "Inc.	
B. Enter new principal office address, if applicable:		5026 Plymouth Street	
(Principal office address MUST BE A ST		Suite 4	
		Jacksonville, Florida 32205	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5026 Plymouth Street	
		Suite 4	
		Jacksonville, Florida 32205	
		ee address in Florida, enter the name of the	
new registered agent and/or the new	N/A	uuress:	
Name of New Registered Agent:			
	N/A	Classic and the second	
New Registered Office Address:		(Florida street address)	
	N/A	, Florida N/A	
	(City)	(Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		Agent: miliar with and accept the obligations of the position.	
Sig	nature of New Regist	tered 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>V</u> <u>M</u> i	hn <u>Doe</u> ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	Kaylah A. Norris	8050 103rd Street
Add			F-11
X Remove			Jacksonville, Florida 32210
2) Change	S	Carolyn Marie Love	7400 Hogan Road
\overline{X}_{Add}			Apt 309
Remove			Jacksonville, Florida 32216
3) Change			
Add			
Remove			
Kemove			
4) Change		W	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
_			
Add			
Remove			

L. If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)
Carration and anterior of necessary.	(ac speeding)
N/A	
1	
moreover 12 months of the same and the same	
	•

The date of each amendment(s) adoption: October 10, 2012	
Effective date if applicable: October 10, 2012	
(no more than 90 days after amendment fi	le date)
•	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes c was/were sufficient for approval.	ast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The are adopted by the board of directors.	nendment(s) was/were
Dated October 9, 2012 Signature Hollen Steple La h Prese	h+/Pata
(By the chairman or vice chairman of the board, president or of have not been selected, by an incorporator — if in the hands of other court appointed fiduciary by that fiduciary)	
Roderick Stephan Love, Sr.	
(Typed or printed name of person signing)	
President/Pastor	
(Title of person signing)	