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SEGRETARY OF STATE TALLAHASSEE FLORIDA

Amend

MAR 2 6 2012

T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CrossEyed Ministries, INC.
DOCUMENT NUMBER: N10000011545
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
R. Leon Sapp
(Name of Contact Person)
CrossEyed Ministries
(Firm/ Company)
33 Grand Myrtle Dr
(Address)
Ponte Vedra, FL 32081
(City/ State and Zip Code)
leon@crosseyedministries.org E-mail address; (to be used for future annual report notification)
For further information concerning this matter, please call:
R. Leon Sapp (Name of Contact Person) at (904) 923-0841 (Area Code & Daytime Telephone Number)
(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:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \Bigcup \$43.75 Filing Fee & \Bigcup \$52.50 Filing Fee Certificate of Status

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

Street Address

(Additional copy is

enclosed)

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

Certified Copy

(Additional Copy is Enclosed)



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 21, 2012

R. LEON SAPP CROSSEYED MINISTRIES, INC. 33 GRAND MYRTLE DRIVE PONTE VEDRA, FL 32081

SUBJECT: CROSSEYED MINISTRIES, INC.

Ref. Number: N10000011545

We have received your document for CROSSEYED MINISTRIES, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 312A00009862

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Articles of Amendment to Articles of Incorporation of

FILED 12 MAY 26 AM II: 17

CrossEyed Ministries, INC.

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

SECRETARY OF STATE TALLAHASSEE FLORIDA

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(Document Number of Corporation (if known)

A. If amending name, enter the new name o	f the corporati	on:		
N/A			The ne	
name must be distinguishable and contain the "Company" or "Co." may not be used in the i		ion" or "incorporated" or the abbreviation "Corp." or	"Inc.	
B. Enter new principal office address, if app (Principal office address MUST BE A STREE	olicable:	N/A		
Trincipus office unareas <u>income par par (613).</u>	<u> </u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
D. If amending the registered agent and/or	registered offic	e address in Florida, enter the name of the		
D. <u>If amending the registered agent and/or new registered agent and/or the new reg</u>				
new registered agent and/or the new reg				
N	istered office a			
new registered agent and/or the new reg Name of New Registered Agent:	istered office a	(Florida street address)		
new registered agent and/or the new reg Name of New Registered Agent:	istered office a	ddress:		

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: X Change	PT	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove		_	
4)ChangeAddRemove			
5) Change Add Remove			
6) Change Add Remove			



E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Please Amend Article III by keeping the current text and adding the below two (2) sections labeled "a." and "b.".
a. CrossEyed Ministries is organized exclusively for charitable, religious, educational, and
scientific purposes, including, for such purposes, the making of distributions to
organizations that qualify as exempt organizations under section 501(c)(3) of the Internal
Revenue Code, or corresponding section of any future federal tax code.
b. Upon the dissolution of CrossEyed Ministries, assets shall be distributed for one or more exempt
purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding
section of any future federal tax code, or shall be distributed to the federal government, or to a
state or local government, for a public purpose. Any such assets not disposed of shall be
disposed of by a Court of Competent Jurisdiction of the county in which the principal office
of the organization or organizations, as said Court shall determine, which are organized
and operated exclusively for such purposes.

The date of each amendment(s) adoption: 3/16/2012						
	ective date if applicable: 3/16/2012	•				
	(no more than 90 days after amendment file date)					
Ade	option 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 3/15/2012 Signature					
	(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)	•				
	Robert Leon Sapp Jr.					
	(Typed or printed name of person signing)					
	President & Chairman of the Board					
	(Title of person signing)					