# NII 000000930

(Re	questor's Name)	<del> </del>		
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	÷#)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



700253980027

11/25/13--01018--022 \*\*43.75

SECTAL AND 25 PH 2: 29

DEC 0 5 2013 T. CARTER

#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

Division of Corporation			
, NAME OF CORPORATION	ON: LIFEPOI	NT CHURC	H MINISTRIES,INC.
DOCUMENT NUMBER:	N1100000	0930	
The enclosed Articles of An		abmitted for filing.	
Please return all correspond	ence concerning this ma	atter to the following:	
SILAS DEFI	GUEIREDO		
		(Name of Contact Per	son)
		(Firm/ Company)	
1847 SW JA	MESPORT	DRIVE	
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Address)	TO THE TOTAL PROPERTY OF THE TOTAL PROPERTY
PORT SAIN	T LUCIE	FLORIDA	34953
		(City/ State and Zip Co	ode)
SILAS	SEJOELMA	@MSN.CC	M
		ed for future annual repo	
For further information conc	erning this matter, pleas	se call:	
SILAS DEFI	GUEIREDO	) <sub>at (</sub> 772	4753676  Code & Daytime Telephone Number)
(Name of Co	ntact Person)	(Area	Code & Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made	payable to the Florida De	partment 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 A Amendme	ddress nt Section		et Address ndment Section

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

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

#### Articles of Amendment to Articles of Incorporation of



### 13 NO! 25 P.1 2: 29 LIFEPOINT CHURCH MINISTRIES, INC (Name of Corporation as currently filed with the Florida Dept. of State) N11000000930 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida \_\_\_ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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)

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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change Add		_		
Remove 2) Change		_		
AddRemove				
3 ) Change Add Remove		_		
4) Change Add		_		
Remove 5) Change		_		
Add				
6) Change Add		_		
Remove				<u> </u>

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Said organization is organized exclusively for charitable, religious, educa
tional, and scientific purposes, including, for such purposes, the making of distributions
to organizations that qualify as exempt organizations under 501(c)(3)
of the internal revenue code, or corresponding section of any future federal tax code.
Upon the dissolution of the organization, 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
in the county in which the principal office of the organization is then located,
exclusively for such purposes or to such organization or organizations,
as said court shall determine, which are organized and operated exclusively
for such purposes.

The date of each amendment	, if other than the	
date this document was signed.  Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated 10/	Dilos Jael de Fraisen Lo	
have n	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)	
silas ja	el defigueiredo	
<del></del>	(Typed or printed name of person signing)	
Preside	ent	
- · · · · · · · · · · · · · · · · · · ·	(Title of person signing)	