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PIL TU 2022 JAH -5 AH 2: 20 SECRETARY OF STARK

COVER LETTER

TO: Amendment Section Division of Corporations

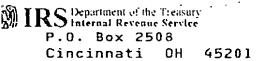
NAME OF CORPORATI	Holy Ghost Revival	Cener Deliverance an	d Soul Winnir	g Ministries
DOCUMENT NUMBER:	N11000006703			
The enclosed Articles of Ar		mitted for filing.	. =	
Please return all correspond	lence concerning this matt	er to the following:		
Brenda Copeland				
		(Name of Contact Pe	erson)	·
Holy Ghost Revival Center	Deliverance and Soul Wi	nning Ministries		
		(Firm/ Company	·)	
4020 NW, 17th Avenue				
		(Address)		
Miami, Florida 33142				
		(City/ State and Zip (Code)	
codestiny@gmail.com				
	E-mail address: (to be used	for future annual rep	ort notification	
For further information con	cerning this matter, please	call:		
Brenda Copeland		at	786	3931082
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florida I	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi S Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)
> 4 - 111	A	C4.		

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



In reply refer to: 0248245444 July 21, 2011 LTR 4168C E0 84-1381525 000000 00

00014496

BODC: TE

DELIVERANCE AND SOUL WINNING MINISTRIES
% WARREN COPELAND PASTOR
1184 NW 48TH ST
MIAMI FL 33127

Employer Identification Number: 84-1381525 Person to Contact: Ms K Griffith Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

11

This is in response to your July 12, 2011, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(03) of the Internal Revenue Code in a determination letter issued in April 1998.

Our records also indicate that you are not a private foundation within ... the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(i).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

Articles of Amendment to Articles of Incorporation

FILED 2022 JAN -5 AM 2: 20

Holy Ghost Revival Center Deliverance and Soul Winni	ng Ministries, Inc.	SECRETARY on a
Name of Corporation as currently filed with the Flor	ida Dept. of State)	TALLAHASSER FLU
N11000006703		
(Document N	umber of Corporation (if kn	own)
ursuant to the provisions of section 617.1006, Florida St mendment(s) to its Articles of Incorporation:	atutes, this Florida Not For	Profit Corporation adopts the following
. If amending name, enter the new name of the corp	oration:	
Deliverane and Soul Winning Ministries Inc.	··· · · · · · · ·	.he new
ome must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	poration" or "incorporated	or the abbreviation "Corp." or "Inc."
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered off	ice address:	
Name of New Registered Agent:		
New Registered Office Address:	(Flo	rida street address)
-		Cladd.
	(City)	Florida (Zip Code)
ew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I a		he obligations of the position.
	Signature of New Register	red 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	Fred Stimage	4020 N.W. 17th Avenue Miami, Florida 33142
Remove			-
2) Change Add			
Remove 3) Change Add Remove		_	
4) Change Add		-	<u> </u>
Remove			
5) Change Add		_	
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	
	-		

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-		- 11 - 11 - 1
The date of each amendment(s) adoption	:	, if other than the
date this document was signed.	·	If other than the
that this document was inglied.		
Effective date if applicable:		
	no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will not not of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
—		
The amendment(s) was/were adopted l was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

and by the boa	ard of directors.
Dated	12/22/21
Signature	Breneder Corpeland
(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)
	Brende Copeland
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were