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MC JUN - 9 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations		WORS
NAME OF CORPORATION: HEAVE	= NLY GRACE NEW BE	591N
DOCUMENT NUMBER: N1100	0007741	
The enclosed Articles of Amendment and fee are sub-	bmitted for filing.	
Please return all correspondence concerning this matter		
PASTOR ROWLA	AND YOUNG JACK (Name of Contact Person)	
Heavenly grac	e Christian (en)	tor
218 W. MICh	119an SWeet	
	(78/4/2005)	
Orlando, Pl	32806	
-	(City/ State and Zip Code)	
heavenlygva E-mail address (to be used	a cential continuity of factor. Co	M
For further information concerning this matter, please	se call:	
Rowland Young J (Name of Contact Person)	Area Code & Daytime Telephone Number)	;
Enclosed is a check for the following amount made pa	payable to the Florida Department of State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	\$\$\subseteq\$\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	
Mailing Address Amendment Section	Street Address Amendment Section	
Amendment occupit	Witelument occupi	

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment to Articles of Incorporation

International Inc.

of
Heavenly grace New Beginning Worship center
(Name of Corporation as currently filed with the Florida Dept. of State)
N11000007741
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Hogvenly Grace Christian Center International
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:
"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) 18 W. MICHIGAN STVERE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 218 W. Michigan Street () Ylando, Fl 32806
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:
NOT APDING-610
Name of New Registered Agent:
(Florida street address)
New Registered Office Address: 218 MIChigan Street Orlando, Florida FL 32806 (City) (Plorida sgreat address) (Florida sgreat address)
Orlando Florida FL 32806
(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.

Page 1 of 4

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>V</u> <u>Mike</u>	Doe Jones Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	I		Address	
1) Change Add Remove						-
2) Change Add Remove	**					-
3) Change Add Remove						- -
4) Change Add Remove	A	1	2/1		AP	- P_
5) Change				·		-
Remove			,			
6) Change			,			_
Remove						

f amending or adding addition track additional sheets, if necessitach additional sheets, if necessitations.	ssary). (Be spe	ecific)		
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or the supplier of the supplint of the supplier of the supplier of the supplier of the supplin			/	
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The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) l.	
adopted by the board of directors Dated Signature	pers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
have not bee	en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Rou		
	(Typed or printed name of person signing)	
PAS	TOR AND FOUNDER	
'	(Title of person signing)	