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SECRETARY OF STATE
MALLARAS SECTELORIDA

JUN 15 2017 T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION VICTORIA AN	d Deliverance Life Changing Min
NAME OF CORPORATION: VICIDIA GIV	the true and the true
DOCUMENT NUMBER: NI 100000 7	966
The enclosed Articles of Amendment and fee are submi	itted for filing.
Please return all correspondence concerning this matter	to the following:
Tanaka Gay	Name of Contact Person)
Victoryana Deliverance Life Ch	
90 Box 140354	
	(Address)
Gainesville, Fr 3alei	City/ State and Zin Code)
Vlife outreuch chotme E-mail address: (to be used f	only state and zip codey
E-mail address: (to be used f	or future annual report notification)
For further information concerning this matter, please co	
Tamka Gates	(350) 494-9891
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Department 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	Street Address

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

Victory and Deliverance Life (hanging Ministries, Inc.
(Name of Corporation as current NIII)())))))))))) 7966	ly filed with the Florida Dept. of State)
(Document Numbe	r of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation Victorious Life There are must be distinguishable and contain the word "corporation".	national, Inc. The new on" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	.1
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office agent.	
Name of New Registered Agent:	NIA
 	(Florida street address)
New Registered Office Address:	(PIO na street maress)
	, Florida
	(City) (Zip:Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept the obligations of the position
Si	gnature of New Registered Agent, if changing
	the state of the s

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 <math>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	PT John D V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) her attach additional sheets, if necessary). (Be specific)	e: N/A
	······································
· ·	

The date of each amendment(s) ad late this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will neartment of State's records.	ot be listed as the
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)	
adopted by the board of directo		
Dated	16/17	
Signature Ja	16/17 naha Lates.	
have not bee	nan or vice chairman of the board, president or other officer-if directors n selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
	Tanaka Gates	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	