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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Mercy Christian Ministry NAME OF CORPORATION:	y International Inc	C.	
N11000009536			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
Roy C. Okonkwo			
(Na	me of Contact Pe	rson)	
Mercy Christian Ministry International Inc.			
	(Firm/ Company	)	
P. O. Box 431			
	(Address)		
Hernando, FL 34441			
(Cit	y/ State and Zip (	Code)	
hephzibah I 0@embarqmail.com			
E-mail address: (to be used for	future annual rep	ort notification	)
For further information concerning this matter, please call:			
Roy C, Okonkwo	at	407	730-1396
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payabl	e to the Florida D	epartment of S	State:
(/	43.75 Filing Fee & ertified Copy Additional copy is nclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

**Mailing Address** 

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

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

## Articles of Amendment to Articles of Incorporation of

Mercy Christian Ministry International Inc.		
(Name of Corporation as current	ntly filed with the Flo	rida Dept. of State)
N11000009536		
(Document Numb	ber of Corporation (if l	(nown)
Pursuant to the provisions of section 617.1006. Florida Statut mendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fl</i>	or Profit Corporation adopts the following
. If amending name, enter the new name of the corporate	tion:	
		The new
ame must be distinguishable and contain the word "corpord Company" or "Co." may not be used in the name.	uion" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRESS</u>	)	
. Enter new mailing address, if applicable:		₹:0 <b>∞</b>
(Mailing address MAY BE A POST OFFICE BOX)		
		2 P
If amonding the registered egent and/or registered off	ina addunus in Flauida	and an about a second and about a second and a second a second and a second a second and a second a second and a second and a second and a second a second and a
<ol> <li>If amending the registered agent and/or registered office and/or the new registered agent and/or the new registered office and/or the new registered off</li></ol>		, enter the name of the
		Die 15
Name of New Registered Agent:		
	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	(F	lorida sireei address)
	, Florida,	
	•	(Zip Cinic)
lew Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fa	miliar with and accept	t the obligations of the position.
	Signature of New Regis	tered Avent 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>John Doe</u> Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Ndubusi Anyagu	P. O. Box 431
Add			Hernando, FL 34441
X Remove			
2) Change	D	Abraham A. Orighoye	P. O. Box 431
X Add			Hernando, FL 34441
Remove			
3) Change			<u></u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	9/20/2018 e date of each amendment(s) adoption:	if other than the
EU	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be rument's effective date on the Department of State's records.	listed as the
Ad	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 $\frac{9/24/2018}{}$	
	Signature Royal Company of the Compa	
	(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)	
	Roy C. Okonkwo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	