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(R	equestor's Name	e)
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PICK-UP	TIAW	MAIL
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Certified Copies	Certificat	es of Status
		
Special Instructions to	Filing Officer:	J. HORNE
		OCT 1 2 2023

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: PCOPheti	c Angels Ministries	
DOCUMENT NUMBER: N//0000	•	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matte		
Christopher I	Danie 13	
	(Name of Contact Person)	
	(Firm/ Company)	_
2084	Lanclover Blup (Address)	
	(Address)	_
	(City State and Zin Code)	
	(City/ State and Zip Code)	
E-mail address: (to be used	d for future annual report notification)	
For further information concerning this matter, please	e call:	
Christoper Donice (Name of Contact Person	15 at 772 828-5475	_
Enclosed is a check for the following amount made pa		
□ \$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	Amendment Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

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10/1/20 30 TO
44/1/8

\sim	Articles of Incorporation
Prophatica O	01 62
(Name of Corporation as currently filed with the	a classical distribution of the control of the cont
came of Corporation as currently filed with the	CHIST C. ES
(Name of Corporation as currently filed with the	Fiorida Dept. of State)
NII/	1)/// AAQQIQ 300
(Docume)	ent Niver
Pursuant to the province	ent Number of Corporation (if known)
amendment(s) to its A = 1.1	da Statutos et :
to its Articles of Incorporation:	an Statutes, this Florida Not For Profit Cornersian
A. If amending name, enter the new name of the c	ent Number of Corporation (if known) da Statutes, this Florida Not For Profit Corporation adopts the following
adinc, enter the new name of the c	Corneration
Trophetic Manalago.	<u></u>
name must be distinguishable and	Stries Church of God in Christ The new corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be	corporation" or "in with CT CT CTOCIN ("hoist INC.
not be used in the name.	"Incorporated" or the abbreviation "Corn" or "I
B. Enter new principal office address, if applicable (Principal office address MUST RF 4 STREET	or p. or Inc."
(Principal office address MUST RE A STREET	19244 (14)
(Principal office address MUST BE A STREET ADD	
	Brooksville FL 34601
	34601
C Enter-	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX	
TICE BOX	19249 Cortez Bluo
	B 6 1
	Brooksville FC 34601
	34601
D. If amending the registered	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	Office address in the
agent and/or the new registered off	ice address in Florida, enter the name of the
Name of New Registered Agent:	
The Registered Agent:	1//
	A / / A
New Registered Office Address:	(Florida street address)
,	an eet address)
	(City) , Florida
New Registered Agent's Signature	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	ed Agant.
as registered agent. I am	familiar with and
· ·	with and accept the obligations of the position
	- Leamont
	Signature of New Registered Agent, if changing
	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: XChange X Remove X Add	<u>V</u> <u>M</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		N/A	
Remove		.1	
2) Change Add		<i>N/</i> a	
Remove 3) Remove		N/A	
4) Change Add		N/A	
Remove			
5) Change Add		<i>N/</i> A	
Remove		.1	
6) Change Add		$\frac{N/A}{}$	
Remove			
E. If amending or addin (attach additional shee	e additiona ets, if necesso	Articles, enter change(s) here: ary). (Be specific)	
		MA	

		
7		· ••
		<u> </u>
		
	A/A	
		
***		<u> </u>
		
		
The date of each amendment(s) adoption date this document was signed.	ption:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will no rtment of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adoptives/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	

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 9/27/2023 /
Signature / how Jamel D
(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)
Christophen Daniels
(Typed'or printed name of person signing)
Pastor
(Title of person signing)