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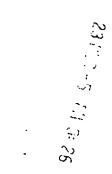
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Prophetic Angels Ministries
DOCUMENT NUMBER: <u>N 1100009869</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher Daniels (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
2084 Landover Blvo (Address)
(Address)
Springhill FL 34608 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christopher Daniels at 772 828-5475 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address New York Street Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Articles of Amendment to

Articles of Incorporation of

	, "	: 23
Prophetic Amels Min	Strips	
Name of Corporation as currently filed with the Flo	rida Dept. of State)	.)
NII	10000,986,9	1 51
(Document)	Number of Corporation (if kn	own)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the followin
A. If amending name, enter the new name of the cor	poration:	•
Word to the Generations	Church COC	5.1.C. The ne
name must he distinguishable and contain the word "co	rporation" 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: (Principal office address MUST BE A STREET ADDI	DECC)	
(Frincipal office address <u>Stost BE ASTREET ADDR</u>	<u></u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	D	
[
D. If amending the registered agent and/or registere	ed office address in Florida,	enter the name o <u>f the</u>
new registered agent and/or the new registered o	ffice address:	,
Name of New Registered Agent.		
	// /	' /)
		s idalstreet address)
<u>New Registered Office Address:</u>		,
		Florida (Zip Code)
	(Ciţy)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		the obligations of the position.
	Signature of New Registe	
	ingramme ty tree freguesia	

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: \underline{X} . Change \underline{X} Remove \underline{X} Add	$\frac{\underline{PT}}{\underline{V}}$ $\underline{\underline{SV}}$	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u> 	<u>Addres</u> s
1) Change Add		_ N/A_	
Remove		/ .	
2) Change Add		N/#	
Remove 3) Change Add Remove		NA	
4) Change Add		<i>N/A</i> _	
Remove		,/	
5) Change Add		<i>N/A</i>	
Remove		1	
6) Change Add		_ <u> </u>	
Remove			
		ional Articles, enter change(s) here: essary). (Be specific)	
		AAA	
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The date of each amendment(s) adopt date this document was signed.	otion:	_, 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 not truent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adoption was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)	

	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	1711/3
Signature	Chris Daniels
_	(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)
	Christopher Daniels
	(Typed or printed name of person signing)
	Pastan
	I CALLI CALA

Articles of Amendment Articles of Incorporation of

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Prophetic Angels Ministries	- 3 -
(Name of Corporation as currently filed with the Florida Dept. of State)	· ;
N1100009869	راد
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corpora</i> amendment(s) to its Articles of Incorporation:	ntion adopts the following
A. If amending name, enter the new name of the corporation: Word to the Generations Church C.O.G.I.C. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevia "Company" or "Co." may not be used in the name.	The new
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)	
D. If amending the registered agent and/or registered office address in Florida, enter the name new registered agent and/or the new registered office address: Name of New Registered Agent:	of the
New Registered Office Address:	Florida
(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	of the position.
Signature of New Registered Agent, if che	anging

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> i	<u>Addres</u> s
i) Change Add		N/A	
Remove 2) Change Add		N/A	
Remove 3) Remove 4 dd Remove		N/A	
4) Change Add		- <i>MA</i>	
Remove 5) Change Add		_ N/A	
Remove 6) Change Add		N/A	
Remove			
E. If amending or add (attach additional she	ing addit eets, if ned	ional Articles, enter change(s) here: cessary). (Be specific)	
·		-++++	
		1	

he date of each amendment(s) adopt ite this document was signed.	ion:, if other than th
ffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
ote: If the date inserted in this block do cument's effective date on the Departr	
loption of Amendment(s)	(CHECK ONE)
The amendment(s) was (was a dis-	d 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 Signature (By the chairman or vice chairman of the board of
(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)
(Typed or printed name of person signing)
Pastar (Title of person signing)