# N11000010051

(Re	equestor's Name)	
· (Ad	ldress)	
(Ad	ldress)	,
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 22, 2012

SHIWANA IRVING
HOLY FAATH THE WORD CHURCH, INC. FAITH
220 GANDY ST

AUBURNDALE, FL 33823

SUBJECT: HOLY FAITH THE WORD CHURCH, INC.

Ref. Number: N11000010051

We have received your document for HOLY FAITH THE WORD CHURCH, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts Regulatory Specialist II

Letter Number: 012A00014905

## COVER LETTER

**TO**: Amendment Section Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: **≦**\$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

### **COVER LETTER**

Division of Corporations Holy Faith the Word Church, Inc DOCUMENT NUMBER: N/1000/1005 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person) Stroot / Holy Faith the word church, Inc E-mail address: (to be used for future angual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee \$\mathbb{\omega}\$\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed)

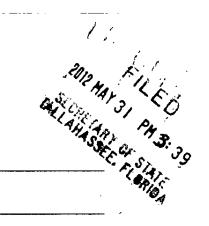
Mailing Address

TO: Amendment Section

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



(Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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: (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 of the new registered agent and/or the new registered office address: New Registered Office Address: 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.

Signature of New Registered Agent, if changing

Page 1 of

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	PT John D			
_	<u>V</u> <u>Mike Jones</u>			
_X Add	<u>SV</u> <u>Sally S</u>	<u>mith</u>		
Type of Action (Check One)	Title	<u>Name</u>	Address	
Change Add Remove	7	JAMES Thompson	2727 Ave M. N.W WinterHaveni Fl 33881	
2)Change Add Remove	_0_	Embrige Bembry	200 Ave K, S.E Apt 343 Winter Haven, El	
3)Change Add Remove	VP.	James Thompson	2727 Ave M NIW 12:01ER HAVEN , Fl 33881	
4) Change Add Remove	φ	Will Chatman	unknun address	
5)Change Add Remove	RA agent	Shinang Irving	4211 Handcock Ave Highland, City 33846	
6) Change Add Remove	R.A. Residen	Mary Stubb Hagent	502 AVEINE USIN TER HAVENIEL 33881	
add -	Tiffani	g Bembry - Che	urch Clerk	

The date of each amendment(s) adoption: 5/25/12
Effective date if applicable: 5/27/12
(no more than 90 days after amendment file date)
Adoption 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 5/27/12 Signature Shivana Awing
(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)
Shiwana Ir Ving
(Typed or printed name of person signing)
Resident agent
(Title of person signing)