N12 000 000 179

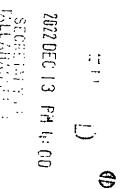
	(Requestor's Name)
	(Address)
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	(City/State/Zip/Phone #)
PICK-UI	P WAIT MAIL
	(Business Entity Name)
	(Dusiness Entity Name)
	(Document Number)
	,
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
	J. HORNE MAR - 3 2003

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:		FOR THE KINGDO	M INTERNAT	IONAL MINISTRIES, INC	
N12 DOCUMENT NUMBER:	2000000179				
The enclosed Articles of Amena	Iment and fee are sub	mitted for filing.			
Please return all correspondence	concerning this matt	er to the following:			
Ms. MiChon Chunn					
		(Name of Contact P	'erson)		
WINNING SOULS FOR THE	KINGDOM INTERN	IATIONAL MINIST	RIES, INC		
		(Firm/ Compan	у)		
230 ARIANA AVE					
		(Address)			
AUBURNDALE, FLORIDA 33	3823				
,	·	(City/ State and Zip	Code)		
MICHON78@YAHOO.COM					
E-ma	il address: (to be use	d for future annual re	port notification	1)	
For further information concern	ing this matter, please	e call:			
MICHON CHUNN		a	863 t	440-2382	
(Na	ine of Contact Person		(Area Code)	(Daytime Telephone Number	er)
Enclosed is a check for the follo	wing amount made p	ayable to the Florida	Department of	State:	
■ \$35 Filing Fee □	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Certifi	D Filing Fee cate of Status led Copy tional Copy is used)	
Mailing Adds	ress	<u>s</u>	reet 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

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2022 DEC 12	D
2022 DEC 13	PH 4: 02
	;

WINNING SOULS FOR THE KINGDOM INTERNATIONAL MINISTRIES, INC

Name of Corporation as currently filed with the Florida D	ept. of State)	一种技术的 数据:
N12000000179		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Proj</i>	fit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	ion" or "incorporated" or t	The new he abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	230 ARIANA AVENUE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	AUBURNDALE, FLORID	A 33823
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 new registered agent and/or the new registered office a		the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida s	treet address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: niliar with and accept the of	oligations of the position.
	anature of New Registered s	trant if channing

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	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	TRES	COREY QUINN SR	507 TWIN PINE DRIVE APT D AUBURNDALE, FLORIDA
× Remove 2) Change Add	SEC	THERESA HAYES	965 WALDON AVENUE BARTOW, FLORIDA
X Remove	SEC	AKISIA BELVIN	33830 202 KENNEDY COURT APT C AUBURNDALE, FLORIDA 33823
4) × Change Add	TRES	MICHON CHUNN	3028 ROBERT AVENUE APT E AUBURNDALE, FLORIDA
Remove			33823
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
ARTICLE II The princip	al place of busine	ss address: 230 Ariana Avenue Auburndale F	EL 33823

	 	
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
#1 cm		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements. tepartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes east for the an	nendment(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 12/8/2022
Signature Million Ohio Charles of the board and the officer of the state of the sta
(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)
MICHON CHUNN
(Typed or printed name of person signing)
TREASURER
(Title of person signing)